Report of the Medical Officer of Health for 1978

Lukis House,
Grange,
Guernsey.

Sir,

I have the honour to present to you the Annual Report on the health of the Bailiwick of Guernsey for the year 1978.

I have the honour to be, Sir,

Your obedient servant,

C. G. WHITE,

Medical Officer of Health.

The President,
Board of Health,
Guernsey.

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Principal Nursing Officer—Miss M. E. Vincent, S.R.N.

Dr. C. G. White, M.B.E.
Medical Officer of Health.

MEMBERS OF STAFF

Public Health Department		*Date of commencement of service with Dept.*
WHITE, Dr. C. G.	M.B.E., M.A., B.M., B.Ch., D.P.H., D.I.H. Medical Officer of Health	15.11.62
WITHERICK, Dr. Elizabeth H.	M.B., B.Ch., (Wales), Deputy Medical Officer of Health	24. 4.69
Health Inspectors		
BALL, Mr. J.	M.R.S.H., M.E.H.A. (Member of the Environmental Health Association, formerly Association of Public Health Inspectors) Chief Public Health Inspector	1. 9.64
BAIRDS, Mr. J. M.	M.R.S.H., M.E.H.A. Public Health Inspector	14. 3.66
EDWARDS, Mr. S. R.	A.M.E.H.A. Senior Assistant Sanitary Inspector	15. 1.46
WILTSHIRE, Mr. S. B. W.	M.E.H.A. Public Health Inspector	1. 2.71
HARDIE, Mr. C. A.	Public Health Inspector	1. 1.75
Health Visitors		
CLEMENTS, Mrs. M.	S.R.N., S.C.M., H.V.Cert. Nursing Officer, Heath Visiting	15. 1.73
LE TOCQ, Mrs. I. A. R.	R.S.C.N., R.G.N., S.C.M. H.V.Cert.	18. 2.63
SIMON, Mrs. J.	S.R.N., S.C.M., H.V.Cert.	7. 2.66
RENIER, Miss H. M.	S.R.N., S.C.M., H.V.Cert.	1. 4.70
GREEN, Mrs. M.	S.R.N., S.C.M., H.V.Cert.	13.11.72
MATTHEWS, Miss A. D.	S.R.N., H.V.Cert.	1. 1.75
GOSS, Mrs. A.	S.R.N., H.V.Cert.	1. 1.78
School Nurses		
SMITH, Mrs. S.	S.R.N.	14. 2.72
ROLAND, Mrs. J.	S.R.N., S.C.M.	1. 3.72
Community Nursing Team		
Aeschimann, Miss D.	B.A.Hons., S.R.N., S.C.M. Nurse Co-ordinator.	13. 1.75
Domiciliary Nursing Sisters		
BAKER, Miss P.	S.R.N., S.C.M.	1. 1.75
WEBBER, Miss L. C.	S.R.N., S.C.M.	1. 1.75
DE JERSEY, Miss A. P.	R.S.C.N., S.R.N., S.C.M.	1. 1.75
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LE CONTE, Mrs. M.	S.R.N., S.C.M.	18. 8.75
MEW, Mrs. P.	S.R.N.	28. 6.76
LE GALLEZ, Mrs. C.	S.R.N., S.C.M.	1. 1.78
Chief Clerk	GOODENOUGH, Mrs. M. A.	1. 5.77

INTRODUCTION

The following paragraphs are included for those who may read this report without any background information about the area it concerns.

The administrative area is the Bailiwick of Guernsey, which comprises the islands of Guernsey, Alderney, Sark, Herm and Jethou. Guernsey is the largest of these and the most westerly of all the Channel Islands: Alderney is the most northerly and but nine miles from the coast of France. Sark, Herm and Jethou lie between Guernsey and that section of the coast of France which contains the Bay of Avranches. Alderney and Sark each have their own Parliament, the States of Alderney and the Sark Chief Pleas. This is an over-simplification which must suffice for present purposes, but the student will not lack for much more detailed information elsewhere.

The Public Health Department functions within the Board of Health. The Board is a standing committee of the States of Guernsey, deriving its powers from Guernsey legislation and responsible to the States. This independence from the central government of the United Kingdom is what the stranger to the Channel Islands finds most difficult to understand. Nevertheless it is so and some 900 years of self-government since William, Duke of Normandy gained the English Crown are sufficient proof of this.

GEOGRAPHICAL

The island of Guernsey lies seventy five miles from Weymouth, forty two from Cherbourg and sixty one from St. Malo. In area 24.5 square miles (6353 hectares) its highest point is 345 feet (105 metres) above mean sea level.

(*Guernsey Census 1976 Table 2. Guernsey 15,699 acres: Herm 314 acres, Jethou 50 acres. All are surface land areas and are exclusive of foreshore).

METEOROLOGICAL DATA 1978

(Records are those made at Guernsey Airport—unless otherwise stated).

Sunshine hours:

Guernsey—Airport	1757.5	Average 1955-77	1833.4
L'Ancresse	1880.5		

British Isles

1	Guernsey L'Ancresse	1880.5	11	Portland Bill	1756.5
2	Jersey St. Helier	1879.5	12	Sandown Isle of Wight	1754.4
3	Torbay	1853.7	13	Dale Fort	1723.9
4	Jersey Gorey	1832.9	14	Scilly Isle	1722.7
5	Penzance	1827.2	15	Alderney	1709.1
6	Shanklin Isle of Wight	1824.2	16	Eastbourne	1703.4
7	Lizard	1798.4	17	Littlehampton	1695.6
8	Jersey Airport	1785.4	18	Tenby	1674.8
9	Prawle Point	1763.6	19	Swanage	1672.2
10	Guernsey Airport	1757.5	20	Weymouth	1670.3

Sunless days:

Guernsey	55	Average 1955-77	61.3

Rainfall:

Total 1978: 811 mms. (31.95 ins.)	Average 1947-77: 856.1 mms. (33.7 ins.)

Rain days:

159	Average: 1947-77: 176

Temperature:

Mean maximum:	12.9°C (55.2°F)	Average 1947-77:	13.2°C (55.8°F)
Mean maximum:	8.3°C (46.9°F)	Average 1947-77:	8.4°C (47.2°F)
Daily range:	4.6°C (8.3°F)	Average 1947-77:	4.6°C (8.3°F)

(With acknowledgements to the Weather Report for 1978 by Mr. M. J. Lillington, Senior Meteorological Observer, Guernsey Airport).

VITAL STATISTICS—GUERNSEY ONLY—1978

Population estimate—residents	54,320
Area	16,101 acres
Population density	3.37 per acre

	Number		Rate 1978	Rate 1977	Mean of 5 years 1973-1977	Highest in 5 years 1973-1977	Lowest in 5 years 1973-1977	England & Wales Latest available published figure 1977-1978	
Deaths	567	per 1000 resident population							
		Crude	10.44	11.37	11.66	11.93	11.30	11.07	11.09
		* Corrected	9.50	10.35	10.61	10.86	10.28		
Cancer mortality (all forms)	131	,, ,,	2.41	2.91	2.68	2.91	2.55	2.55	2.58
Lung cancer mortality	34	,, ,,	0.63	0.74	0.62	0.74	0.52	0.69	0.70
Tuberculosis mortality	2	,, ,,	0.04	0.04	0.03	0.05	0.00	0.02	0.02
Live births (legitimate and illegitimate)	582	,, ,,	10.71	10.83	12.02	13.28	10.83	11.6	12.1
Live births (illegitimate only)	53	,, live births	91.07	109.03	100.69	113.96	69.02	97.05	101.00
Stillbirths	6	,, total births (live and still)	10.20	5.09	11.79	16.10	5.09	9.4	8.5
Infant mortality (deaths in first year of life)	9	,, live births	15.46	8.52	13.56	16.87	8.52	13.08	13.02
Neonatal mortality (deaths in first month of life)	4	,, ,,	6.87	1.71	9.75	13.09	1.71	9.3	8.7
Early neonatal mortality (deaths of infants under one week)	4	,, ,,	6.87	1.71	8.80	12.84	1.71	7.6	7.1
Perinatal mortality (still births and deaths of infants under one week)	10	,, total births (live and still)	17.01	6.78	20.47	25.76	6.78	17.00	15.5
Maternal mortality	0	,, ,,	0.00	0.00	0.29	1.45	0.00	0.13	0.11

* The correction is related to the particular age and sex distribution of the island. The comparability factor is 0.91.

"Look to your health; and if you have it, praise God, and value it next to a good conscience; for health is the second blessing that we mortals are capable of; a blessing that money cannot buy."

Compleat Angler.
Izaak Walton
1593-1683.

After the droughts of 1976 and the rather dull and uninteresting weather of 1977, 1978 proved to be the windiest year yet recorded at Guernsey Airport. It began with more rainfall than any of the past 40 years and winter was cold, wet and rough. This was the year when the oil rig "Orion" was driven ashore at Grandes Rocques, after which the weather almost seemed to be engaged in a malevolent conspiracy to defeat the salvage team's efforts. That the salvage men triumphed eventually was the more commendable because all the odds appeared to be against them as they worked. March broke all records for the highest gust, mean wind speed and the number of gales.

A cold spell in mid-spring was off-set by much warmer weather as summer approached, but then summer came in cool and dull. Slow but steady improvement developed into the driest Guernsey autumn on record, even though sunshine and temperatures were below average. The wind returned with winter to notch up seventeen days of gale force winds during the year, twice the average of the last thirty years.*

There were some staff changes within the Department during the year, the most notable of which was the retirement of Mr. S. R. Edwards, whose thirty two years of service with the Board of Health made him easily the longest serving member. He will be greatly missed, for we have all lost a loyal colleague, a cheerful companion and a valued friend—quite apart from his extensive memory of precedents and past incidents. He takes with him our best wishes for a long and happy retirement.

Joining us on the first of the year we welcome Mrs. Ann Goss who fills the vacancy left by Mrs. Mary Langlois' premature retirement last year for reasons of ill health.

Still with the Health Visitors, the Board decided to appoint a Nursing Officer, Health Visiting, and invited applications from the existing staff. As a result Mrs. Margaret Clements was the successful applicant and commenced her new appointment on 1st December, 1977.

On the very last day of the year, Mrs. French retired after more than ten years service at Lukis House, during which she became responsible for all shorthand, typing and duplicating services for the whole office and for all filing other than those for the School Medical Services. We wish her many full and happy years in retirement.

This, the 80th Annual Health Report of the series, will be found to have several changes from its predecessors. For reasons fully explained in the section on Population Estimates 1961 to 1978, many differences will be observed from some previously published information, chiefly those expressed as proportions of total population. However, in the light of the information available from the two most recent censuses in 1971 and 1976, a review of previously published vital statistics became essential. If comparisons are to be made, and this is, after all, the principal purpose of publishing the data at all, then they should be based on the most accurate information available.

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* Based on the Annual Weather Report 1978 by Mr. M. J. Lillington, Senior Meteorological Observer, Guernsey Airport.

For those who maintain that Andrew Lang was right in his contention that " statistics are like lamp-posts for a drunken man—more for support than illumination " the decision to research the population data will be a source of some merriment. Nevertheless, the decision has been taken in an honest (and sober) endeavour to shed as much light on the subject as can be derived from sources which are available—but some of which seem to have remained unused.

Throughout 1978 the health of the Bailiwick population remained good with no events or epidemics of dramatic impact to report.

POPULATION ESTIMATES 1961 to 1978

Before Guernsey undertook its own census in 1971, this task was a function of the Registrar General's Office. The 1961 census was published by H.M.S.O. in 1966 and the relevant information contained in it could not be incorporated into Guernsey Annual Health Reports before 1967. Meanwhile, estimates of population for the years preceding the publication of the 1961 census had to be based on the data available from the 1951 census (carried out by the Registrar General) and projections for say, 1966 were being based on facts fifteen years old. Add to this the fact, now well known, that the sixties were a time of considerable net immigration to the islands, one has to accept that population estimates during this period, while they may have been the best available and most conscientiously made, are at least suspect.

Guernsey has now undertaken two censuses; of all the islands in the Bailiwick in 1971 and of Guernsey (including Herm and Jethou) in 1976. In both cases the reports were published within weeks rather than years. The advantages of these swiftly available, factual analyses have made one even less content to continue to use the old estimates of population before 1971.

Looking at these figures again, several anomalies appear which need correction. For example, the denominator for the expression of rates per thousand population was apparently taken as the total enumeration on census night (and the ensuing projections). The table giving the resident population of each island (Table 16 in the 1966 Report of the 1961 census) seems to have been ignored by previous writers of Annual Health Reports. Even more peculiar, births and deaths occurring in Guernsey alone have been expressed as rates per thousand population for the whole Bailiwick that is, all the islands. Certain other rates have been expressed using the same population as denominator. It is facile to be over-critical when one has the advantage of hindsight and, particularly, up to date information. Nevertheless, since better information can be constructed, there would seem to be every justification for using it. This, then, is the reasoning for the population tables which follow. The decision not to go back further than 1961 is purely arbitrary. For comparison purposes, demographic expressions for the years since 1961 are the more valuable and valid.

The 1976 definition of resident population was taken to comprise all persons resident in Guernsey, Herm or Jethou on Census night whether or not they were actually present in the islands at that time. This definition differs from that adopted in previous census reports, whereby the resident population was taken to be the Census night population less visitors, absentee residents being excluded. (see "Guernsey Census 1976 pp. 31 and 32).

The resulting differences are summarised herewith:—

Population description	1971	1976
(*a*) Census night	51,458	54,381
(*b*) Resident, excluding absentees	49,399	51,447
(*c*) Resident, including absentees	50,921	53,637

A choice has to be made. It would appear to be most reasonable to adopt (*c*) as the denominator for events expressed as "per 1,000 resident population", and this has been done for this report.

Unfortunately the same definition cannot be given a value from the data published in 1966 reporting the 1961 Census. Therefore a further choice has to be made; whether to use the resident population given in that Report (at Table 16) that is to say the Census night population excluding visitors and absentees, or to make a guess at the absentees from the island on Census night 1961 and add them. It is easier to explain a choice from facts than to explain the reasoning behind a guess—however inspired (or not)— and so the choice must fall on using the published figure for resident population, as defined at that time—the Census night population less visitors and excluding absentees. One could as easily opt for the Census night enumeration on the basis that visitors and absentees might well cancel out; it is, as already mentioned, purely a matter of choice.

So as to get this matter into perspective, the difference between one choice and the other is of the order of one per cent of the resident population for the year in question. Since, in the calculation of the estimated mid-year populations of the intercensal years 1962 to 1970 inclusive, this error of one per cent will be diminished by one ninth of one per cent per annum, the effect upon the accuracy of demographical expressions presented in this report is less than significant. Nevertheless, the reader is entitled to a full explanation of the data employed and the methods in use.

Table V giving the estimated mid-year resident populations for the years 1961-1978, has been constructed in the following way.

The resident population published in the 1961 Census Report (Table 16) as defined, has been subtracted from the resident population published in the 1971 Census report (in accordance with the definition on p. 31 of the report on the 1976 Guernsey Census) that is to say 50921—44012. The difference is 6,909 persons.

Here a further assumption has to be made. For lack of more accurate information on the precise rate of population increase (other than the natural increase of births over deaths) during that period, the difference is assumed to have been spread evenly over the intervening years. Almost certainly the increase during the decade was not as evenly distributed as this across the decade—but nor were the naturally occurring events such as births and deaths. The compromise is held to be valid, though it will almost certainly provoke argument. Moreover, it is probably nearer to the facts than the population projections for most of the sixties which had, perforce, to be based on the Report of the 1951 Census. Prior to that there is only the 1931 Census to go on and in between there was the biggest upheaval of population in Guernsey's recorded history.

It is a curious fact that the ratio of males to females in the 1961 and 1971 Census remained constant: 48.1 males to 51.9 females. It is therefore reasonable to assume that this ratio obtained throughout the intercensal decade.

By 1976 this ratio had changed; only slightly, it is true, to 48.3 males to 51.7 females. It has to be assumed that this transition took place evenly over the intervening five years. Hence, the male and female populations for all the intercensal years between 1961 to 1976 can be calculated by applying these proportions. The figures derived are rounded to the nearest five units.

Mid-year estimates of population for 1977 and 1978 are derived from the estimates of end-year population made by the Population Working Party. The intercensal data available to the Population Working Party are the best obtainable, although incomplete for lack of facts relating to migration. Short of recommending—and implementing—a cumbersome and bureaucratic system of movement registration, an idea totally abhorrent to a centre of tourism even if it could be made administratively feasible, the lack of migration information has to be accepted.

Attempts to project the probable populations of future years encounter the sort of difficulties one can easily imagine. Nevertheless, the Population Working Party does produce a figure for the population at the end of each year, as it reports, based on all the demographic data available to its members during the preceding years. Beyond that it can only predict what the population for future years is likely to become on the basis of certain stated assumptions and conditions obtaining.

TABLE I

POPULATION—BAILIWICK

Populations of Guernsey, Alderney, and Sark at each Census night 1821-1971
(Adapted from the Bailiwick of Guernsey Census 1971—Table 2)

Census Year	Guernsey	Alderney	Sark	Bailiwick
1821	20,339	1,154	488	22,041
1831	24,540	1,045	543	26,128
1841	26,693	1,038	788	28,519
1851	29,806	3,333	580	33,719
1861	29,850	4,932	583	35,365
1871	30,680	2,738	553	33,971
1881	32,631	2,048	578	35,257
1891	35,287	1,857	572	37,716
1901	40,474	2,062	506	43,042
1911	41,861†	2,561	579	45,001
1921	38,317†	1,598	614	40,529
1931	40,645†	1,521	577	42,743
*1939	43,820	1,442	430	45,692
1951	43,603	1,328	565	45,496
1961	45,066	1,472	561	47,099
1971	51,458	1,686	590	53,734
1976	54,381	—	—	—

Notes: 1. * 1939 population estimated.
2. † Lihou was inhabited in 1911, 1921 and 1931.
3. Guernsey includes Herm, Jethou and Lihou.
4. Alderney includes Burhou.
5. Sark includes Breçqhou.

TABLE II

POPULATION—GUERNSEY

Population: The Census Night Population of Guernsey at each Census 1821-1876 (The populations of Herm and Jethou are allocated to the Parish of St. Peter Port)

Census Year	Guernsey	Herm	Jethou	Totals
1821	20,302	28	9	20,339
1831	24,349	177	14	24,540
1841	26,649	38	6	26,693
1851	29,757	46	3	29,806
1861	29,804	41	5	29,850
1871	30,593	83	4	30,680
1881	32,607	20	4	32,631
1891	35,243	38	6	35,287
1901	40,446	25	3	40,474
1911	41,823	33	2	41,858
1921	38,283	32	0	38,315
1931	40,588	53	2	40,643
*1939	43,820	0	0	43,820
1951	43,554	36	13	43,603
1961	44,968	90	8	45,066
1971	51,351	96	11	51,458
1976	54,256	118	7	54,381

Notes: 1. * The 1939 population was estimated.
2. Lihou was not occupied on Census night except in 1911 (3) 1921 (2) and 1931 (2). (Persons in brackets).
3. Adapted from the Guernsey Census 1976 (Table 1).

TABLE III

POPULATION DENSITY—BAILIWICK

Population by Island and by Parish (Guernsey) giving the acreage of each. 1951, 1961 & 1971.

ISLAND or Parish	Acreage	PERSONS			Persons/acre
		1951	1961	1971	1971
BAILIWICK	19,372	45,496	47,099	53,734	2.77
GUERNSEY	16,062	43,603	45,068	51,458	3.20
Castel	2,524	3,763	4,781	6,317	2.50
Forest	1,016	1,133	1,061	1,460	1.44
St. Andrew's	1,114	1,850	1,964	2,232	2.00
St. Martin's	1,814	4,587	5,223	6,161	3.40
St. Peter Port	1,942	16,849	15,804	16,303	8.40
St. Peter's	1,586	1,638	1,698	1,829	1.15
St. Sampson's	1,502	5,675	5,916	6,534	4.35
St. Saviour's	1,578	1,531	1,792	2,116	1.34
Torteval	769	634	716	841	1.09
The Vale	2,216	5,943	6,113	7,558	3.41
ALDERNEY	1,962	1,328	1,472	1,686	0.86
SARK	1,348	565	559	590	0.44

Notes:
1. Extract from the Bailiwick of Guernsey Census 1971 (Table 3).
2. Guernsey includes Herm and Jethou.
3. Alderney includes Burhou.
4. Sark includes Breçqhou.

TABLE IV

POPULATION DENSITY—GUERNSEY

Resident Population of Guernsey by Parish and acreage and the populations of Herm, Lihou and Jethou with their acreages. 1976.

ISLAND or Parish	Acreage	Persons	Persons/acre
GUERNSEY	16,101	53,637	3.33
Castel	2,520	7,637	2.90
Forest	1,016	1,383	1.36
St. Andrew	1,114	2,295	2.06
St. Martin	1,807	6,072	3.36
St. Peter Port	1,649	16,279	9.87
St. Peter	1,546	1,934	1.25
St. Sampson	1,492	6,802	4.56
St. Saviour	1,575	2,321	1.47
Torteval	769	914	1.19
The Vale	2,211	8,251	3.37
HERM	314	69	0.22
JETHOU	50	8	0.16
LIHOU	38	—	—

Notes:
1. Extracted from the Guernsey Census 1976 (Table 2).
2. Alderney and Sark were not included in the 1976 Census: data for the whole Bailiwick in 1976 are not therefore available.

These population totals (persons, males and females in Table V) are used throughout this report. The old information, some of which has been published over the years and added to each year, appears in this report at Appendix I perhaps for the last time in this form, so that comparisons can be made. This change has meant the recalculation of all those rates expressed as proportions of population. Some of these rates will be at variance with previously published information, sometimes by very little, but, for the reasons given in detail above, the comparisons over the whole seventeen year period, as well as from year to year within that period, are believed to be by far the more accurate.

TABLE V

GUERNSEY Population by Sex for the Past Three Census Years and Estimated population mid-year 1962-78 inclusive.

Year	Population	Male	Female	Ratio M : F
1961 C	44,012*	21,172	22,840	48.1 : 51.9
1962	44,705	21,505	23,200	,, ,,
1963	45,395	21,835	23,500	,, ,,
1964	46,085	22,165	23,920	,, ,,
1965	46,775	22,500	24,275	,, ,,
1966	47,465	22,830	24,635	,, ,,
1967	48,160	23,165	24,995	,, ,,
1968	48,840	23,490	25,350	,, ,,
1969	49,540	23,830	25,710	,, ,,
1970	50,230	24,160	26,070	,, ,,
1971 C	50,921†	24,493†	24,428	48.1 : 51.9
1972	51,465	24,755	26,710	,, ,,
1973	52,005	25,040	26,965	48.15 : 51.85
1974	52,550	25,330	27,220	48.2 : 51.8
1975	53,095	25,620	27,475	48.25 : 51.75
1976 C	53,637°	25,909	27,728	48.3 : 51.7
1977	54,270	26,210	28,060	,, ,,
1978	54,320	26,235	28,085	,, ,,

* Report of Registrar General's 1961 Census (Table 16).

† Report of States of Guernsey 1971 Census (Table 7) as amended by the Report of States of Guernsey 1976 Census at page 32.

° Report of States of Guernsey 1976 Census (Table 5) and see pp. 31-32.

NOTE: Guernsey includes Herm and Jethou.

TABLE VI

Population Estimates Compared

The table below compares previous estimates of mid-year population (column A) with the re-drawn estimated resident population (column B). It can clearly be seen how the immigration " bulge " during the sixties went unremarked, leading to a maximum probable error exceeding—7% in the last year preceding the 1971 Census, the result of which was published only a matter of weeks later.

Year	Past Mid-year Estimate	Post 1976 Census Estimate†	Notes	Difference
1961	45,000	44,012	Census year	—988
1962	45,203	44,705		—498
1963	45,339	45,395		+56
1964	45,475	46,085		+610
1965	45,611	46,775		+1,164
1966	45,747	47,465	1961 census published	+1,718
1967	45,884	48,160		+2,276
1968	46,182	48,840		+2,658
1969	46,343	49,540		+3,197
1970	46,505	50,230	Probable error—7.4%	+3,725
1971	49,399	*50,921	Census year	+1,522
1972	49,972	51,465		+1,493
1973	50,552	52,005		+1,453
1974	51,138	52,550		+1,412
1975	53,200	53,095		—105
1976	53,637	53,637	Census year	0
1977	54,270	54,270		0
1978	54,320	54,320		0

†See Table V.
*As redefined by the report of the 1976 Census.

TABLE VII

IMMIGRATION

Designed to demonstrate the difference between population growth due to the natural increase and the estimated mid-year population of each year based on the data of the past three censuses.

	A	B	C	D	E
			NEXT YEAR		D — C
Year	Estimated Resident Population	Natural Increase	A + B	Actual Estimate	Immigration
1961	44,012	*132	44,144	44,705	561
1962	44,705	228	44,933	45,395	462
1963	45,395	300	45,695	46,085	390
1964	46,085	351	46,436	46,775	339
1965	46,775	248	47,023	47,465	442
1966	47,465	216	47,681	48,160	479
1967	48,160	195	48,355	48,840	485
1968	48,840	96	48,936	49,540	604
1969	49,540	187	49,727	50,230	503
1970	50,230	178	50,408	50,921	513
1971	50,921	122	51,043	51,465	422
1972	51,465	214	51,679	52,005	326
1973	52,005	58	52,063	52,550	487
1974	52,550	69	52,619	53,095	476
1975	53,095	—23	53,072	53,637	565
1976	53,637	17	53,654	54,270	616
1977	54,270	—30	54,240	54,320	80
1978	54,320	15	54,335	—	—

*Seventy per cent of the 1961 natural increase (May-December)—188. See Note (iii).

Notes:

(i) While no data are available by which the rate of immigration can be demonstrated accurately, the level of immigration can be gauged by the difference between the natural increase of intercensal years added to the first census and the population enumerated at the second census.

(ii) Thus if we add to the resident population (as defined) of the 1961 census the natural increase of the subsequent decade and compare this result with the resident population enumerated in 1971, we have a figure representing the effect of net migration during that period.

(iii) A best estimate of the natural increase of population from April 1961 to April 1971 can be obtained by adding to the summed natural increases of the years 1962 to 1970 (both inclusive) 70% of the natural increase which occurred in 1961 and 30% of the natural increase which occurred in 1971.

(Table VII Note (iii) continued).

Natural increase 1961 = 188.	70% =	132
Natural increase 1962-1970 incl.	=	1,999
Natural increase 1971 = 122.	30% =	37
		2,168

The natural increase in population between April 1961 and April 1971 may be said to have been 2,168. This added to the 1961 resident population would have given a resident population in 1971 of 46,180, had there been no migration inwards or outwards. In fact, the census night resident population in 1971 was, 50,921 and the difference, 4,741, can only be accounted for by net immigration during the preceding ten years. This represents a rate of 474 immigrants per year or a fraction over 1% per annum (1.077%) of the starting population in 1961 (44,012).

By the same means it can be shown that the intercensal natural increase from 1971 to 1976 was 408, net immigration during those five years, 2,308 persons or, say, 462 persons per annum, representing a rate less than 1% (0.907%) per annum of the starting resident population in 1971 (50,921).

During the fifteen years 1961 to 1976, 7,049 persons have settled in Guernsey, representing 13% of the estimated resident population on census night 1976.

TABLE VIII

GUERNSEY

Population, Live Births and Live Birth Rate, Deaths, Crude and Corrected Death Rates, Infant Deaths and Infant Death Rates 1961-1978 inclusive.

Year	†Resident Population	Live Births	Birth Rate	Deaths	Crude Death Rate	Corrected Death Rate	Infant Deaths	Infant Death Rate
1961	44,012	757	17.2	569	12.9	11.1	16	21.14
1962	44,705	797	17.8	569	12.7	11.0	15	18.82
1963	45,395	842	18.6	542	11.9	10.3	24	28.50
1964	46,085	891	19.3	540	11.7	10.1	19	21.32
1965	46,775	816	17.5	568	12.1	10.4	16	19.61
1966	47,465	780	16.4	564	11.9	10.2	13	16.67
1967	48,160	741	15.4	546	11.3	9.8	21	28.34
1968	48,840	752	15.4	656	13.4	11.6	16	21.28
1969	49,540	830	16.8	643	13.0	11.2	14	16.87
1970	50,230	794	15.8	616	12.3	10.6	13	16.37
1971	50,921	768	15.1	646	12.7	11.5	10	13.02
1972	51,465	790	15.4	576	11.2	10.2	14	17.72
1973	52,005	653	12.6	595	11.4	10.4	12	18.38
1974	52,550	679	12.9	610	11.6	10.6	9	13.26
1975	53,095	611	11.5	634	11.9	10.9	9	14.73
1976	53,637	623	11.6	606	11.3	10.3	9	14.45
1977	54,270	587	10.8	617	11.4	10.4	5	8.52
1978	54,320	582	10.7	567	10.4	9.5	9	15.46

†See Table V.

Notes relating to Table VIII

1. The estimated mid-year resident population is that at Table V.
2. Guernsey includes Herm and Jethou.
3. Live birth rate is the number of live births in each year per 1,000 estimated resident population.
4. Crude death rate is the number of deaths in each year per 1,000 estimated resident population.
5. The corrected, or standardised death rate is the crude death rate multiplied by a factor calculated from the age and sex distribution of the population at the preceding census. Based on the 1961 census the Registrar General gave this factor the value 0.86. Based on the 1971 census the Office of Population, Censuses and Surveys gave this factor the value of 0.91. These factors have been applied as appropriate.
6. The infant death rate is the number of deaths of infants under one year old per 1,000 live births. (This rate is, of course, unchanged by the recalculation of the resident population).

Vital Statistics 1978

The estimated mid-year resident population is 54,320 persons, being 26,320 males and 28,090 females. This represents an increase of 1.27% on the resident population enumerated in the 1976 census and a 9.96% increase since the census of 1971, an average increase of 1.37% per annum.

Births. There were 582 live births in 1978 compared with 587 in the year before. this represents a rate of 10.7 live births per 1,000 population (10.8 per 1,000 in 1977).

Deaths. 567 deaths in 1978 give a crude death rate of 10.44 deaths per 1,000 population and a corrected rate of 9.50 per 1,000. (617 deaths in 1977 gave a crude death rate of 11.37 and a corrected rate of 10.35 per 1,000).

Natural Increase. The small excess of live births over deaths, only 15 in 1978, is insufficient to make up for the cumulative deficit of the preceding three years. Taking the past five years together the average increase of births over deaths is less than 10 each year.

TABLE IX

Year	Live births	Deaths	Natural increase	Increase per 1,000 population
1968	752	656	+96	+2.01
1969	830	643	+187	+3.87
1970	794	616	+178	+3.64
1971	768	646	+122	+2.47
1972	790	576	+214	+4.28
1973	653	593	+58	+1.15
1974	679	610	+69	+1.35
1975	611	634	—23	—0.04
1976	623	606	+17	+0.37
1977	587	617	—30	—0.55
1978	582	567	+15	+0.28

TABLE X

BIRTHS - 1978

582 Total live births. 6 sets of twins born in 1978. 3 Male sets.
3 Female sets.

(There were 6 stillbirths)

Live Births 1978 by Normal Residence of Mother (Parish Reference)

	St. Peter Port	St. Sampsons	Vale	Catel	St. Saviour	St. Peters	Torteval	Forest	St. Martins	St. Andrews	Others	TOTALS
January	14	6	3	8	3	2	-	1	4	3	2	46
February	10	8	8	4	7	2	1	-	4	2	0	46
March	17	7	12	9	-	-	-	-	2	2	2	51
April	18	7	7	5	2	1	1	-	5	-	3	49
May	14	8	8	13	1	1	1	-	6	-	2	54
June	13	3	8	6	4	4	-	2	5	-	4	49
July	19	8	9	3	2	1	1	2	4	4	-	53
August	14	8	7	9	1	-	-	4	2	1	-	46
September	16	6	12	9	2	1	-	1	2	1	-	50
October	23	10	5	7	-	1	-	-	2	-	-	48
November	12	6	10	5	3	3	-	-	2	3	-	44
December	13	9	6	7	2	1	1	-	5	1	1	46
TOTALS	183	86	95	85	27	17	5	10	43	17	14	582

(Stillbirths - 6 - are NOT included)

TABLE XI

SUMMARY OF MOTHER'S AGE AT CHILDBIRTH

Age Group	1973	1974	1975	1976	1977	Average over 5 yrs. 1973 - 1977	1978
15	1	-	-	1	-	0.4	-
16	3	3	5	3	5	3.8	4
17	10	13	15	11	14	12.6	9
18	14	22	19	16	23	18.8	13
19	24	15	33	22	30	24.8	22
20	25	19	31	26	15	23.2	18
21	42	36	27	30	30	33.0	28
22	36	47	42	39	32	39.2	35
23	57	59	40	38	30	44.8	36
24	56	65	34	53	34	48.4	49
25	54	59	48	59	43	52.6	47
26	60	64	55	48	46	54.6	48
27	59	55	50	47	46	51.4	45
28	36	57	30	50	39	42.4	51
29	35	34	42	48	49	41.6	39
30	25	32	25	35	41	31.6	34
31	22	18	26	16	32	22.8	32
32	14	15	18	17	14	15.6	22
33	17	18	7	15	21	15.6	12
34	16	14	12	7	9	11.6	12
35	14	15	6	9	11	11.0	9
36	6	8	14	8	4	8.0	5
37	7	12	8	5	8	8.0	6
38	4	3	6	4	4	4.2	1
39	2	-	4	5	2	2.6	5
40	5	2	5	3	2	3.4	1
41	2	-	4	5	1	2.4	3
42	2	2	1	2	1	1.6	2
43	3	1	-	-	-	0.8	-
44	-	1	-	1	-	0.4	-
45	1	-	3	-	1	1.0	-
46	-	-	1	-	-	0.2	-
47+	-	-	-	-	-	NIL	-

TOTAL LIVE BIRTHS 1973 - 1977

	1973	1974	1975	1976	1977	5 yr mean	1978
	652	679	611	623	587	630.4	582
Male	351=53.8%	344=50.7%	311=50.9%	326=52.3%	315=53.7%	52.25%	298=51.2%
Female	301=45.5%	335=49.3%	300=49.1%	297=47.7%	272=46.3%	47.75%	284=48.8%

TABLE XII

ILLEGITIMATE BIRTHS—Rate per 1,000 live births 1967-1978

Year	Illegitimate Births No.	Rate per 1,000 Live Births	Year	Illegitimate Births No.	Rate per 1,000 Live Births
1967	(77)	103.91	1972	(66)	83.54
1968	(59)	78.46	1973	(45)	69.02
1969	(77)	92.77	1974	(68)	100.15
1970	(65)	81.86	1975	(68)	111.29
1971	(68)	88.54	1976	(71)	113.96
			1977	(64)	109.03
			1978	(53)	91.07

Illegitimate live births were 17% fewer than in 1977 and 25% fewer than in 1976. For the first time in five years illegitimate live births amounted to less than ten per cent of all live births in the year.

TABLE XIII

MARRIAGES AND MARRIAGE RATES 1968-78

Year	Marriages No.	Marriages per 1,000 population	5-year average
1968	416	8.5	8.9
1969	462	9.3	
1970	465	9.3	
1971	461	9.1	
1972	437	8.5	
1973	417	8.0	7.8
1974	461	8.8	
1975	425	8.0	
1976	390	7.3	
1977	372	6.9	
1978	374	6.9	

TABLE XIV

GUERNSEY 1978

1. Marriages: (Total: 374)

January	14	3.7%	July	38	10.2%
February	20	5.3%	August	52	13.9%
March	31	8.3%	September	57	15.2%
April	25	6.7%	October	38	10.2%
May	34	9.1%	November	22	5.9%
June	22	5.9%	December	21	5.6%
	146	39%		228	61%

2. Divorces: 86
3. Annulments: Nil

MORTALITY EXPERIENCE

Group I *Infective and Parasitic Diseases*

There were only three deaths in this group in 1978, one each, both female, from pulmonary tuberculosis or the late effects of tuberculosis and one male from sarcoidoisis.

TABLE XV

1973		1974		1975		1976		1977		1978	
M	F	M	F	M	F	M	F	M	F	M	F
1	—	2	1	3	—	3	2	1	3	2	1

This is very similar to the pattern of the preceding five years. In 1974 two of the three deaths in this group were ascribed to tuberculosis, in 1975 one, in 1976 three and in 1977 two. In 1974 and 1975 there were single deaths from infectious hepatitis.

Group II *Neoplasms*

Cancers accounted for 131 deaths in 1978, 71 males and 60 females. A closer look at the principal categories of cancer and a comparison with the pattern of the preceding five years can be examined at Table XVI below and in greater detail at Appendix IV.

Lung cancers predominate yet again, while new growths of the alimentary tract caused thirty three deaths altogether, 16 male and 17 female. Of the remainder the most striking are the female sex specific cancers (breast, uterus, uterine adnexae) which accounted for 22 deaths in 1978, much as in the immediate preceding years. 26 ('73), 18 ('74), 21 ('75), 20 ('76) and 23 in 1977.

TABLE XVI

Some Cancers 1973 to 1978

*I.C.D.	1973		1974		1975		1976		1977		1978	
Code	M	F	M	F	M	F	M	F	M	F	M	F
150	1	3	1	—	1	1	4	4	3	6	4	3
151	6	7	6	5	8	5	10	8	12	4	5	—
152-154	9	10	16	13	6	10	6	7	8	10	7	14
157	2	1	—	3	1	2	5	0	4	3	1	1
161	—	—	1	—	1	1	1	—	3	—	1	—
162	26	6	22	8	25	7	22	6	34	6	28	6
174	—	8	—	9	—	15	—	9	—	12	—	10
180-183	—	18	—	9	—	6	—	11	—	11	—	12
185	5	—	5	—	13	—	5	—	8	—	6	—
188	2	1	—	3	1	2	5	—	4	3	1	1
204-207	2	1	2	5	3	1	3	4	4	1	1	1
†All Cancer deaths at all ages	65	64	69	68	77	65	70	69	98	60	71	60
	129		137		142		139		158		131	

*See note (ii) †See note (i)

Notes:

(i) The figures at the foot of each column are not totals of the figures above but the total of all cancer deaths at all ages for the given year.

(ii) *Description of I.C.D. Codes*:

150	Malignant neoplasm of oesophagus
151	„ „ stomach
152-154	„ „ intestine (including rectum)
157	„ „ pancreas
161	„ „ larynx
162	„ „ trachea, bronchus and lung
174	„ „ breast
180-183	„ „ uterus, cervix uteri and adnexae
185	„ „ prostate
204-207	Leukaemia

Group III *Endocrine, Nutritional and Metabolic Diseases*

Five deaths occurred in this group in 1978, all ascribed to diabetes mellitus.

TABLE XVII

Group III deaths

I.C.D. Code	1973 M	1973 F	1974 M	1974 F	1975 M	1975 F	1976 M	1976 F	1977 M	1977 F	1978 M	1978 F
250	2	3	3	5	—	1	—	3	3	3	2	3

I.C.D. Code 250: Diabetes mellitus.

Over the years shown diabetes mellitus has been almost the only entry in Group III. However, in 1976 there were three deaths ascribed to myxoedema (Code 244), one male and two females, the male in the 65-69 age group and both female cases were over 80 years old. Myxoedema has not featured in any of the other years. 1973-78.

Group IV *Disease of Blood and Blood-forming Organs*

Four persons died of various anaemias in 1978, a low figure very much in line with recent experience.

TABLE XVIII

Anaemia deaths

I.C.D. Codes	1973 M	1973 F	1974 M	1974 F	1975 M	1975 F	1976 M	1976 F	1977 M	1977 F	1978 M	1978 F
280-285	—	4	1	—	—	1	—	—	1	2	1	3

Group V *Mental Disorders*

Mental disorders never figure largely in these mortality tables and 1978 has been no exception, only three deaths being ascribed to them.

TABLE XIX

Group V deaths

I.C.D. Codes	1973 M	1973 F	1974 M	1974 F	1975 M	1975 F	1976 M	1976 F	1977 M	1977 F	1978 M	1978 F
290-315	—	—	2	1	—	2	—	1	3	3	1	2

Group VI *Diseases of the Nervous System*

Two deaths only are recorded in this group in 1978, both due to motor neurone disease and both male, one less than a year old and the other in the 65-69 age group.

Group VII *Diseases of the Circulatory System*

As always, by far the largest group accounting for 294 deaths, 128 male and 166 female. These figures represent 52% of all deaths, 47% of all male deaths and 56% of all female deaths.

Over 76% of these 294 deaths fall into three categories, which deserve further examination.

TABLE XX

Deaths due to raised blood pressure, coronary attacks and strokes

I.C.D. Codes	1973 M	1973 F	1974 M	1974 F	1975 M	1975 F	1976 M	1976 F	1977 M	1977 F	1978 M	1978 F
400-404	10	14	2	16	6	5	8	6	10	15	6	2
410-414	69	30	80	43	84	47	77	61	65	60	72	68
430-438	44	43	32	52	43	43	27	56	37	63	26	50

I.C.D. Codes: 400-404 Hypertensive Heart disease ("Blood pressure")
,, ,, 410-414 Ischaemic Heart disease ("Coronaries")
,, ,, 430-438 Cerebrovascular disease ("Strokes")

Given their commoner names, blood pressure, coronaries and strokes, these three categories dominate the mortality picture, causing nearly four in ten of all deaths. All, but particularly the largest, middle section, are tobacco related. The pattern in 1978 is no exception, as a glance at Table XXI will show. (See also Table XXII below.)

TABLE XXI

I.C.D. Codes together 400-404, 410-414 and 430-438	1973		1974		1975		1976		1977		1978	
	M	F	M	F	M	F	M	F	M	F	M	F
	%		%		%		%		%		%	
As % all deaths, all ages	40	31	38	35	38	33	37	40	36	45	38	42
As % all Group VII deaths	71	64	78	64	73	64	79	71	78	79	81	72
Above codes, both sexes	%		%		%		%		%		%	
As % all deaths, all ages	35		37		36		39		41		40	
As % all Group VII deaths	68		71		69		75		79		76	

It is interesting to note how female deaths from these heart conditions have grown steadily to equal the male proportion of all deaths. While the male proportion has remained remarkably constant at about 38%, the female proportion has increased to equal this in average (38%) over the past six years. However, for the past three years the female proportion has exceeded the male. The same trend is observable when female deaths from these groupings are shown as proportions of all female cardiac deaths.

Taking both sexes together, the trend is steadily upwards over the six years under examination. However, it must be remembeied that the figures given are for all ages. If one now turns to Appendix IV, it is clearly evident that male cardiac deaths occur at much earlier ages. If one takes age 65 as a dividing line, female cardiac deaths predominate at ages beyond 65; male cardiac deaths have already prevented many men from reaching that age.

Table XXII

I.C.D. Codes	MALE		FEMALE	
	Below-Age	65-Above	Below-Age	65-Above
400-404	2	4	—	2
%	33%	77%	—	100%
410-414	29	43	6	62
%	40%	60%	9%	91%
430-438	2	24	3	47
%	8%	92%	6%	94%
All above Codes	33	71	9	111
%	31.7%	68.3%	8.5%	91.5%

This display shows quite clearly the significant difference between the sexes in deaths due to coronary and ischaemic heart disease. Males die before reaching the age of 65 five times as often as females.

Group VIII *Diseases of the Respiratory System*

Only fifty-six deaths were attributed to respiratory diseases and these were almost equally divided between the sexes 29M : 27F. The largest number 24 (9M : 15F) appears under the heading (485) " Bronchopneumonia, unspecified " and it can be seen from the age groups affected that this is commonly a terminal event in the 75+ age group. With these should be included Pneumococcal pneumonia (2 deaths), Pneumonia, unspecified (6 deaths) and Pulmonary congestion and hypostasis (3 deaths). So 39 of these 56 deaths (70%) are really recording the mode of dying of persons already into, or approaching, the eighth decade of life. The detail of the remaining 17 deaths can be seen at Appendix IV under Group VIII.

Group IX *Diseases of the Digestive System*

Fourteen deaths were recorded in this category during 1978, half of them due to cirrhosis of the liver. Gastric or peptic ulcer accounted for three more.

Group X *Diseases of the Genito Urinary System*

Only seven deaths occurred in this category; all but one were certified as due to kidney infections.

Group XI *Complications of Pregnancy, Childbirth and the Puerperium*

Group XII *Diseases of the Skin and Subcutaneous Tissue*

No deaths were certified in either of these categories during 1978.

Group XIII *Diseases of the Musculoskeletal System and Connective Tissue*

Group XIV *Congenital Anomalies*

Only one death was certified in each of these groups.

Group XV *Certain causes of Perinatal and Morbidity and Mortality*

Four infant deaths occurred in the first week of life, three ascribed to prematurity and one to respiratory distress syndrome. 1976 experience was very similar.

Group XVI *Symptoms and Ill-defined conditions*

Of the 16 deaths occurring in this category fifteen are ascribed to senility, all of which occurred in the 75+ age group.

Group N XVII *Accidents, Poisoning and Violence*

Twenty six deaths were certified in this category during 1978, 20 males and 6 females. The Nature of Injury table III at Appendix III is not so informative as Appendix V giving the External Cause of Death. From this it can be seen that seven deaths (5 M : 2 F) were associated with road traffic accidents, two (2 M) were due to drowning, two (2 M) were the result of falls, two (2 M) due to fire and five (3 M : 2 F) were considered at inquest to have been successful suicides. Two other sudden deaths, both males, were undetermined whether accidently or purposely inflicted.

Non-resident deaths—1978

Thirty six deaths occurred to visitors to the island (26 M : 10 F). The detail can be examined at Appendix VI. More than three quarters of these were due to circulatory diseases—25 (19 M : 6 F); the remaining eleven showing no significant clustering.

Alderney Deaths—1978

Twenty two deaths occurred among Alderney residents in 1978. Ten were due to circulatory diseases (6 M : 4 F) and six to cancer, all lung cancer (5 M : 1 F). The detail can be seen at Appendix XII.

TABLE XXIII

CREMATIONS

A total of 246 cremations took place in 1978. This includes 9 requested from elsewhere.

Table

Year	Cremations Guernsey	Cremation Requests	Cremations (Guernsey) as a Proportion of Resident Deaths
1970	177	7	29.0 per cent
1971	212	5	33.0 ,, ,,
1972	213	4	37.0 ,, ,,
1973	206	4	35.0 ,, ,,
1974	218	8	36.0 ,, ,,
1975	222	12	35.0 ,, ,,
1976	223	12	37.0 ,, ,,
1977	260	12	42.0 ,, ,,
1978	246	9	43.0 ,, ,,

Cremation Requests are requests for cremations at the Guernsey crematorium for persons other than Guernsey residents.

These figures are not included in column 2 or 4.

So cremation's proportion of total disposals of the dead continued to increase, although the number of elections for cremation was lower than last year. The number of cremation requests from elsewhere was also reduced in 1979.

Infectious Disease Notifications

A total of 322 infectious diseases notifications were received 67% of them (217) referring to measles. These were the tail end of the epidemic which commenced in the autumn of 1977: 443 cases of measles had occurred between September 1st and December 31st 1977. As can be seen from Table XXIV the epidemic was over by April 1978 and a total of some 865 had been recorded in the seven months September 1977 to March 1978.

There were only 23 notifications of whooping cough, compared with 157 in 1977, but food poisoning notifications were up almost 80% (33 in 1977: 59 in 1978) Most of these cases were due to a single focus which, although it occurred late in the visitor season, proved difficult to eradicate.

Eight cases of tuberculosis were notified but only five of these were pulmonary. Four were relapses of past known cases. The non-pulmonary cases included one genito-urinary case and two small bowel infections.

The one notification of malaria was a sick seaman transferred by the R.N.L.I. lifeboat from a ship eastbound up-Channel. The vessel's last port of call had been in West Africa where this member of her crew had gone ashore without regard to any anti-malarial precautions or medication.

Number and nature of immunisations provided at
Lukis House (excluding School Medical Services B.C.G. and rubella)
1978

TABLE XXIV

Cholera	119
Flu	409
Polio	194
Rabies	28
Smallpox	348
Tab/cholera	8
Tetanus	17
Typhoid	12
Yellow Fever	3
	1138

TABLE XXV

NOTIFIABLE INFECTIOUS DISEASES

The following notifiable infectious diseases were reported during the year.

Disease 1978	Total	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Encephalitis	1	1	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	59	1	2	1	—	—	—	2	22	23	7	—	1
Hepatitis	3	—	—	—	—	—	—	—	1	2	—	—	—
Infective Jaundice	2	—	—	—	—	—	1	1	—	—	—	—	—
Malaria †	1	—	—	—	—	—	—	—	—	—	—	—	—
Measles	217	138	44	22	3	2	1	2	—	2	1	2	—
Meningitis	1	—	—	—	—	—	—	—	1	—	—	—	—
Pertussis	23	10	4	3	4	—	—	—	—	1	—	1	—
P.T.B.	8	—	2	—	—	—	—	1	—	1	—	2	2
Scarlet Fever	8	3	1	1	—	—	—	1	—	—	2	—	—
TOTALS	322	153	53	27	7	2	2	7	24	29	10	5	3

† not included in total.

TABLE XXVI

Accidental Poisoning—Children

	1978				1977			
	M	F	Monthly Total	Quarterly Total & to date	M	F	Monthly Total	Quarterly Total & to date
Jan	—	1	1	2/2	1	—	1	
Feb	1	—	1		2	1	3	
Mar	—	—	—		1	1	2	6/6
April	2	—	2	4/6	1	—	1	
May	1	—	1		—	2	2	
June	1	—	1		3	5	8	11/17
July	—	1	1	4/10	2	1	3	
Aug	1	—	1		3	1	4	
Sept	1	1	2		3	4	7	14/31
Oct	—	—	—	6/16	—	1	1	
Nov	2	3	5		2	3	5	
Dec	1	—	1		1	2	3	9/40
Totals	10	6	16		19	21	40	

Based on hospital returns only.

The incidence of accidental poisoning among children shows a welcome reduction from the 40 cases in 1977.

In 1978 of sixteen cases, 10 were due to tablets being left within reach and a further case was due to cough medicine.

Table XXVII

Accidental Poisoning—Children—1978

				AGE							
POISON	Total all ages		1978 Total	Under 1		1		2		3	
	M	F		M	F	M	F	M	F	M	F
Tablets	6	4	10	—	1	—	1	3	1	3	1
Liquids											
Bleach	1	—	1	—	—	—	—	—	—	1	—
Nail Polish	—	1	1	—	—	—	—	—	1	—	—
Phensedyl	—	1	1	—	—	1	—	—	—	—	—
Weed Killer	1	—	1	—	—	—	—	—	—	1	—
Berries/seeds											
Black Alder Berries	—	1	1	—	—	—	—	—	—	—	1
Deadly Nightshade	1	—	1	—	—	1	—	—	—	—	—
TOTALS	9	7	16	—	1	2	1	3	2	5	2

COMMUNITY NURSE CO-ORDINATOR'S REPORT FOR 1978

The year 1978 will be remembered for the decision of the Obstetric Committee to restore to the Community Midwives the domiciliary visits which, for six years, had been made to mothers and babies in the South of Guernsey by the hospital midwives. The " cradle to grave " scope of the Community Nursing Service was resumed and was welcomed with enthusiasm.

It will also be remembered as a year much bedevilled by back troubles. This tiresome and painful ailment in its several forms has long been recognised as an occupational hazard among nurses. The Community Nurse, visiting alone and caring for patients often enfeebled by age in their own low-level beds, is probably particularly at risk of severe backstrain or " disc " trouble.

The use of the two electronic pagers, ordered at the end of 1977, began in the Country Districts and their value as an improved means of communication was immediately recognised—although their high-pitched bleeping took some getting used to. A third such pager was ordered for use by the Country babies midwife and later, when the Telecommunications Board introduced their own pagers for rental, two of these were added for use in Town and the North.

The Community Nursing Amenities Fund was opened and money in lieu of wreaths and donations by grateful patients soon reached a figure worth spending on extra nursing amenities which were not covered by the budget. Although every donation has been individually acknowledged, this opportunity is taken to express the gratitude of the Community Nurses collectively for the generosity of these bequests. They are used, with much careful consideration, to purchase extra items of equipment which make the task of domiciliary nursing easier or more efficient. For instance, further electronic pagers were provided by the amenities fund. They quickly proved their worth, months before they could have been provided by our budget.

Other innovations during 1978 included the carrying of Adrenalin by trained staff for use in an anaphylaxis emergency, the acceptance by the M.O.H. of responsibility for initiating nursing visits to patients who declined to call a general practitioner and the delivery of kindling (from the Prison) for nursing staff to take to patients in need, provided that they were not already on the W.R.V.S. " wooding round."

Speakers at various meetings included Mrs. Pike from C.S.S.D.; Dr. Parsons on Anaphylaxis; Sister Harvie Paul, Stoma-therapist, Mrs. Millard, Dietitian; Mr. Rosoman, Chairman, Victoria Hospital Incorporated; Dr. White on Food Poisoning; Miss Fooks from the Board of Administration on matters regarding insurance; Deputy Miss Lincoln on her Cancer Research and Committee work and Dr. Stanley Allen from the Rank Teaching Centre on the Treatment of Varicose Ulcers, whose basic course had been attended by one of our nurses.

Staff Changes: Mrs. C. Le Gallez, S.R.N., S.C.M., took over the full-time Relief Sister's duties from Mrs. Bayait and her part time vacancy was filled by Miss Margaret E. Jehan, S.R.N., S.C.M., M.T.D., whose addition to the team has proved especially valuable for post-natal visiting, particularly in the Country parishes. One Auxiliary was also added to work in the South.

Out Patients: The increase in numbers both of patients and of vists to them was maintained, particularly concerning patients in the 65 and over age-group. If the same increase occurs, visits during 1979 will be very nearly thirty thousand, representing about thirty percent more visits than in 1976. The visits to maternity patients cannot be estimated on these lines, but it is clear that having the Country babies for the full twelve months in 1979 (instead of for only eight months in 1978) the visits must number about three thousand, so that an overall increase of about 10% is to be anticipated for 1979 over the 1978 figures. No increase in staff has as yet been catered for, but this must follow eventually.

Looking back over 1978 one recalls the happiness occasioned by the visit of Her Majesty the Queen in June, and in December the sadness of attending the funeral service of "Dot" Mauger so soon after her retirement. The sermon ended with the words "Thank God for 'Dot'" and I would add "and for all the others who follow in her footsteps."

D. Aeschimann, S.R.N., S.C.M.

TABLE XXXI

CERTAIN STATISTICS RELATING TO HOUSING

Year	Priority Families	Eviction Cases	17+ Points	1-16 Points	Zero Points	Dwellings Constructed	Families Housed	Dwellings in Course of Construction or Conversion
1968	5	27	25	228	133	29	53	83
1969	7	23	10	220	115	59	109	297
1970	8	25	4	214	160	73	100	244
1971	4	10	1	113	190	183	194	61
1972	2	8	1	95	173	65	154	—
1973	1	8	—	113	155	—	74	—
1974	5	20	3	127	115	—	54	29
1975	2	18	—	161	111	36	51	103
1976	1	13	1	176	101	64	84	58
1977	2	11	—	175	85	46	104	—
1978	—	14	—	187	66	14	84	—

I am indebted to the Secretary, States Housing Authority for the above data.

Accidental Pollution of Water Supplies

During discussions in 1979 my attention was drawn to the frequency of incidents involving danger to Guernsey's water supplies. The following tables (XXXII A and XXXII B) have been compiled for inclusion in this report by the Engineer and Manager of the Water Board, Mr. T. A. Hurst to whom I would like to take this opportunity of expressing my gratitude.

We tend alas, to take a plentiful supply of wholesome water very much for granted. Even after the drought of 1976, during which we all learned more frugal habits with water, it has not taken long to return to the long-held assumption that we have only to turn on a tap to draw as much water as we want of unquestioned quality and safety.

But it is not just as easy as that: time and again during 1978 (as in previous years) we have the vigilance of the Water Board to thank that we can even hold such comfortable assumptions. For those, not a few, who have no piped supply and rely upon their own boreholes or wells, the following information may contain little comfort. The island's catchment area may not diminish in acreage, but its character is modified by every roofed, covered or paved surface that occurs within it, and the number of potential pollutants multiplies annually.

TABLE XXXII A

WATER POLLUTION 1978 GUERNSEY

A. BY MONTH OF OCCURENCE AND SITE AFFECTED

Site Affected	Year	J	F	M	A	M	J	JY	A	S	O	N	D
Vale Pond	17	3		4	1		1	1	1	2	3		1
Marais Stream	15	5	4	1			1			1		3	
St. Saviour's Reservoir	10	1	3	1			1		2			1	1
Petit Bot Stream	10				1		2		1	2		4	
Charroterie Stream	4						1	1			1	1	
King's Mills	6	2	1				3						
Jamblin Quarry	4		1	1		2							
Marc de Carteret	3									1	1	1	
Moulin Huet	5					1					1	3	
Well No. 6	4		1		1						2		
Well No. 5	2	1	1										
Well No. 2	1			1									
Saint's Bay	1										1		
Clos du Valle	1					1							
Ville Baudu Quarry	1	1											
Pre du Murie	1												1
1978 TOTALS	85	13	11	8	3	4	9	2	4	6	9	13	3

From Table XXXII A it is clear that in 1978 there were at least 85 separate incidents of pollution affecting the island's water supplies. The Vale Pond was worst affected (17 instances) closely followed by the Marais Stream (15 instances) and the St. Saviour's Reservoir and the Petit Bot stream on ten occasions each. These four sites account for over 61% of the incidents, but few sources escaped entirely.

Taking the month of occurence the pattern is as follows:—

	Incidents	*% of total*
1st quarter	32	38%
2nd ,,	16	19%
3rd ,,	12	14%
4th ,,	25	29%
1978	85	100%

Only one third of these instances occurred during the spring and summer (April to September inclusive)

TABLE XXXII B

B. BY MONTH OF OCCURENCE AND NATURE OF POLLUTANT

NATURE OF POLLUTANT	YEAR 1978	J	F	M	A	M	J	JY	A	S	O	N	D
(* see detail below)													
Pesticides & Chemicals used in Horticulture	38	3	8	3	1	3	4		4	2	3	7	
Oil Spills (inc. Petrol (1))	25	10	3	4	1		1	1		2			3
Foul Drainage inc. Sewage and Farmyard Slurry	14			1		1	1	1		2	4	4	
Others	8				1		3				2	2	
1978 TOTALS	85	13	11	8	3	4	9	2	4	6	9	13	3

" Agral "	(1)	" Pentac "	(2)
Dimethoate	(1)	Phenols	(5)
Hydrofluoric Acid	(2)	" Temik "	(4)
Formaldehyde	(3)	" Vydate "	(16)
Gamma B.H.C.	(1)	Others	(1)
" Maneb "	(1)		
DDT	(1)	Total:	(38)

Referring now to Table XXXII B to examine the category of pollutant, it can be seen that 45% of all instances are due to various chemicals used in horticulture, including pesticides. Clearly a great deal more care is needed in the application of these substances and in the disposal of surpluses. Indeed it is probably fair to say that there is insufficient attention paid to the relevant legislation governing the disposal of potentially toxic wastes.

Oil spills accounted for 24 instances (excluding the petrol spill)—or 28%, more than a quarter. The usual cause is a corroded oil storage tank, commonly supplying a vinery. A number of these, of similar age, were installed before the introduction of legislation requiring the provision of catchment pits, capable of holding the whole contents of such tanks in the event of a leak. Unless scrupulously maintained, corrosion attacks these particularly where it is most difficult to observe—the under surface and bearing points.

The absence of any catchpit means that any leak, slow or fast, inevitably soaks into the ground—with the resulting risk to water supplies.

Foul drainage, including farm drainage, caused 16.5% of the 1978 pollution incidents. Some of these were associated with unusually heavy rainfall overwhelming otherwise adequate drainage arrangements, but not all.

Once pollution is dected immediate action is necessary to divert the affected stream or source away from storage—in other words, running it to waste. This may seem obvious and of little consequence. In times of plentiful rainfall it may be possible to stand the loss of an affected stream until it has run clear, but if drought conditions recur, such as were experienced in 1976, a single pollution incident of this order could mean the difference between people rationing themselves (which they did most conscientiously and effectively) and standpipes in the streets.

Dear Dr. White,

Special Treatment Clinic

Attendance figures for the year 1978

I have pleasure in forwarding to you the figures for 1978. They remain very similar to those of 1977.

Volunteer School leavers accompanied by a teacher have continued to visit the Clinic for instructional talks and it is interesting to note that in June this year, shortly after their visit to the Clinic, the following question was asked in the University of London Human Biology Examination at 'O' Level—"In what ways does the Community benefit from Special Treatment Clinics for the treatment of Venereal diseases?"

It is hoped that the pupils who visited the Clinic were able to answer the question with confidence and perhaps some little knowledge.

Yours sincerely,
J. E. T. Strickland
Venereologist

See Appendix X (Male Clinic) & Appendix XI (Female Clinic)

SEXUALLY TRANSMITTED DISEASES

The Pathology Laboratory confirmed Venereal Disease in 11 cases. 6 Male and 5 Female. Age and sex distribution of these cases is given below:

Age Group	*Male*	*Female*
Under 20 years	—	1
Over 20 years	2	2
30-39 years	3	—
Age not known	1	2
	6	5

No new cases of Syphilis apart from those diagnosed at the Special Clinic.

EXTRACTS FROM THE QUARTERLY REPORTS OF MR. J. BALL, CHIEF PUBLIC HEALTH INSPECTOR FOR THE YEAR 1978

INTRODUCTORY

The second half of the year proved to be a trying time for the Public Health Inspectors. The problems of Staff shortage, (due to the retirement of one inspector) and personal illness were compounded by a number of outbreaks and sporadic incidents of food poisoning during July and continuing, although under control and on the wane, until the end of September. Two inspectors were fully occupied in this sphere alone but nevertheless all complaints and requests for advice and assistance were dealt with, although all routine work had to be curtailed.

1978 saw the retirement of Mr. S. R. Edwards, Eddie, as he is known to his fellow officers and friends, must have been the longest-serving member of the Public Health Department after a 'career' of 32 years, during which he carried out all duties asked of him. Well-liked and respected professionally and socially, he had the rare qualities of promptness, punctiliousness, self-discipline, methodical approach and organisation.

He was held in great esteem by other departments, not least the States Dairy and Tourist Committees.

I thank him personally for his loyal and devoted service and wish him a long and contented retirement. He will be missed in his familiar chair of office, but not forgotten.

STATISTICAL

The total number of complaints recorded was 1330, excluding numerous requests for advice and guidance: rodent control complaints totalled 2553.

The following table includes classified, routine and special visits and inspections carried out by Public Health Inspectors in the general category (i.e. excluding food matters).

TABLE XXVIII

CLASSIFIED VISITS AND INSPECTIONS

	1978	1977
Housing inspections	432	544
Houses in multiple occupation	2	11
Overcrowding complaints	6	7
Drainage—general	222	421
Drain tests applied	6	28
Septic tanks	5	6
Public sewers	17	15
Water supplies	17	65
Public conveniences	23	32
Verminous premises—visits	38	48
Disinfestations	9	54
Atmospheric nuisances	108	120
Noise nuisances	16	11

CLASSIFIED VISITS AND INSPECTIONS (continued)

	1978	1977
Refuse accumulations ...	120	106
Controlled tips ...	15	10
Infectious disease investigations ...	7	—
Infectious disease other visits ...	5	—
Workplaces ...	6	2
Factories ...	2	1
Schools ...	—	1
Victoria Avenue Quarry-tip ...	42	26
Camping sites ...	8	4
Rodent control investigations ...	54	57
Streams etc. ...	12	15
Plans inspected ...	20	31
Island Development Committee visits ...	4	—
Swimming pool water (Bact.) ...	6	20
Swimming pool water (Cl_2 & pH) ...	66	243
Visits to Herm ...	4	3
Visits to Alderney ...	1	1
Visits with other departments ...	12	15
Miscellaneous visits ...	53	94
Unsuccessful visits ...	79	101
Complaints from parochial authorities ...	5	2
Dangerous structures ...	4	—
Nursing/residential homes ...	12	1
Lectures ...	1	—

HOUSING

440 housing inspections (including re-inspections) were made during the year.

Housing closures

Eleven dwellings were closed during the year. One closed dwelling is worthy of particular mention in more detail:

A pseudo-Georgian terraced house in St. Peter Port, occupied for 46 years by three sisters, age 97, 90 and 78, was found to be completely unfit in all respects. Externally sited water supply and lack of proper means of waste water disposal meant the awesome task of carrying buckets and bowls of water and waste water up and down a dangerous staircase. No rear access necessitated the bringing in of coal via the front door; similarly the refuse bin had to be manually negotiated via the same access. These tasks were carried out by the middle sister (90 years). The dwelling was damp with a badly defective roof, dark, dismal and in gross disrepair lacking all amenities, the only comfort being a coal fire over which the 97 year old lady sat.

Immediate action was necessary and, to avoid stress and anxiety, it was decided to close with the shortest possible notice. There appeared to be some distress at the thought of the upheaval of the removal, but the collapse of the ceiling of the top floor bedroom accelerated their desire to move.

With the appreciated help of the States Housing Authority and the States Insurance Authority and their brother (a sprightly 86 year old—the complainant on behalf of his sisters) and a person who assisted financially and wished to remain anonymous, the removal was effected without incident, and their 'valuable antiques' were also fortunately able to be moved without mishap.

Two intriguing points emerged. (1) One cannot but admire the sheer guts and grim determination with which these ladies in their ageing years have been endowed in coping with such 'Dickensian' conditions for so long without complaint! (2) How many other cases are there like this?

FOOD CARE AND HYGIENE, FOOD PREMISES

The following table refers to the activities of the Public Health Inspector in the field of food control, food premises, and food hygiene.

TABLE XXIX

CLASSIFIED INSPECTIONS AND VISITS—FOOD

	1978	1977
Sampling—food	108	59
—milk	2	—
—ice cream	7	15
—water	78	104
Food consumer complaints	84	49
Food complaints—other visits	218	120
Food surrender	179	230
Restaurants, cafes, etc.	331	223
Bakehouses	41	50
Canteens	9	5
Public houses	33	47
Hotels, guest houses	351	209
States Dairy and milk depots	14	8
Dairy farms	35	61
Ice cream and food registrations	10	5
Wet fish dealers	8	34
Fish and chip shops	21	51
Grocers	162	174
Greengrocers	16	25
Butchers	87	84
Confectioners (bakery)	25	23
Kiosks (beach, etc.)	28	50
Food factories	32	27
Slaughterhouse	15	11
States markets	6	10
Mobile vehicles	29	25
Wholesale/storage depots	46	50
Visits with other departments	16	—
Miscellaneous visits	766	345
Unsuccessful visits	260	162
Food poisoning—investigations	71	9
Food poisoning—other visits	560	449
Examination of food	52	95
Supervision of destruction of surrendered food	65	114
Food hygiene lectures	8	8

The figure of 766 for miscellaneous visits is an indication of the number of visits necessarily made for deposition and collection of stool specimens in connection with confirmed or suspected food poisoning cases.

FOOD COMPLAINTS

84 complaints were received; all were resolved without resort to formal action (49 in 1977).

Samples submitted for Bacteriological Examination

134 samples were taken—including 37 from wells/boreholes (14 unsatisfactory) and 13 from Beau Sejour pool and surrounds (2 unsatisfactory). The remainder were mainly routine food sampling (28 in connection with suspect food poisoning investigation).

Samples submitted for Chemical Examination

61 samples were taken for routine and 'on request' or 'following complaint' checking. No adverse comment is offered. Where necessary enquirers were advised of the results.

Foodstuffs Voluntarily Surrendered during 1978

Amongst the food surrendered were the following items:

TABLE XXX

Meat (fresh/frozen)	4391 lbs.	8280 lbs. in 1977
Meat (tinned)	2516 lbs.	9627 lbs. ,,
Meat products	1544 lbs.	3674 lbs. ,,
Frozen foods	8402 lbs.	15683 pkts. ,,
Fruit and vegetables	8022 lbs.	11723 lbs. ,,
Cheese	1896 lbs.	
Fish and shellfish	980 lbs.	
	38 gallons	
Miscellaneous	8049 pkts./tins	
	345 litres	

COMMENT

The miscellaneous items include 4,944 tins of evaporated milk withdrawn by the manufacturer due to a processing fault and 345 litres of artificial cream withdrawn by the manufacturer in connection with a food poisoning outbreak in Jersey.

DISINFESTATION

Eighty-one disinfestations were carried out during the year, principally by the rodent-operating staff, but some on a 'do-it-yourself' basis under the guidance of a public health inspector. The heaviest demand for assistance occurred during the months of July, August and September when 48 treatments were carried out.

ALDERNEY

The island was visited by a public health inspector on one occasion only, in response to official request.

HERM

This island was visited on four occasions during the year; three of the visits being in connection with food hygiene matters.

RODENT CONTROL

There were 2,416 complaints or requests for assistance received during the year. The figure quoted does not include revisits, secondary treatments, test baiting or survey activities.

Category percentages were as follows:

Scheduled sector	43.5%	43% in 1977
Non-scheduled	56.5%	57% ,,

The Department's two operators were called on to work overtime in dealing with infestations on a number of beaches in the northern part of the Island: these infestations were brought under control at the end of September.

HEALTH EDUCATION

Nine lectures were delivered during the year on the subjects of food control, food hygiene and rodent control. Carried out at the College of Further Education, the lectures were for the purpose of preparing students to take the examination for the Diploma of the Royal Institute for Public Health and Hygiene.

PUBLIC HEALTH DEPARTMENT—FINANCE 1978

(The figures for 1977 are shown in brackets—adjusted to the nearest £1)

			£	£
Analyst's Fees			1690	(1755)
Cleaning, Fuel, Light, Water and Rents			7167	(6856)
Infectious Diseases:				
Doctor's Fees	3956	(3026)		
Drugs, Vaccines etc.	2520	(4322)		
	6476			
Less Recoveries	1237	(620)		
			5239	(6213)
Office Equipment and Furniture			1017	(1051)
Postage, Stationery and Telephone			4092	(5063)
Rodent and Pest Control Materials			1890	(1829)
Salaries and Wages			175267	(145477)
Special Treatment Clinic			10748	(7453)
Superannuation less Employee's Contribution			22635	(19791)
Upkeep and Repair of Building			854	(827)
Travelling Expenses			15713	(14712)
Welfare Foods	2784	(2844)		
Less Recoveries	2836	(1257)		
			52 CR	(461)
Other Expenses			1875	(2738)
			248135	(214226)
Less Recoveries from Education Council			22595	(22554)
			£225540	(191672)

APPENDIX I

YEAR	Guernsey Estimated Population to middle of each year	BIRTHS		DEATHS			DEATHS Under 1 year	
		No.	Rate per 1,000 pop.	No.	Crude Rate per 1,000 pop.	Corrected Rate per 1,000 pop.	No.	Rate per 1,000 Births
1961	45,000	757	16.8	569	12.6	8.82	16	21.1
1962	45,203	797	17.6	569	12.5	8.68	15	17.6
1963	45,339	842	18.5	542	11.7	8.21	24	28.5
1964	45,475	891	19.6	540	11.89	10.22	19	21.32
1965	45,611	816	17.9	568	12.45	10.71	16	19.61
1966	45,747	780	17.05	564	12.3	10.57	13	16.6
1967	45,884	741	16.14	546	11.46	9.83	21	28.34
1968	46,182	752	16.28	656	14.2	12.21	16	21.28
1969	46,343	830	17.91	643	13.87	11.93	14	16.87
1970	46,505	794	17.07	616	13.24	11.39	13	16.37
1971	49,399 *	768	15.55	646	13.08	11.90	10	13.02
1972	49,972	790	15.81	576	11.53	10.49	14	17.72
1973	50,552	653	12.92	595	11.77	10.71	12	18.38
1974	51,138	679	13.28	610	11.93	10.86	9	13.25
1975	53,200	611	11.48	634	11.92	10.85	9	14.73
1976	53,637*	623	11.62	606	11.3	10.28	9	14.44
1977	54,270	587	10.83	616	11.37	10.35	5	8.52
1978	54,320	582	10.71	567	10.44	9.50	9	15.46

This table has now been superseded (Table V), the principal reason being the redefinition of "resident population" in the Report of the 1976 Census. This has entailed a re-estimation of the mid-year population for each of the Intercensal years and therefore the recalculation of those rates expressed as a proportion of population. This table will not be published again and is repeated here only for purposes of comparison with the redefined "resident population" (Table V).

* Census figures.

APPENDIX II—POPULATION BY AGE GROUPS 1961-1971—GUERNSEY BAILIWICK

Age last Birthday	1961			1971			Percentage inc. or dec.(–) 1961-1971		
	Persons	*Males*	*Females*	*Persons*	*Males*	*Females*	*Persons*	*Males*	*Females*
0- 4	3706	1912	1794	4033	1994	2039	8.82	4.29	13.66
5- 9	3481	1809	1672	4324	2214	2110	24.22	22.39	26.19
10-14	4075	2076	1999	4044	2052	1992	(–)0.76	(–)1.15	(–)0.35
15-24	5706	2853	2853	7885	3984	3901	38.19	39.64	36.73
25-34	5693	2826	2867	6417	3229	3188	12.72	14.26	11.20
35-44	6011	2955	3056	6154	3030	3124	2.38	2.54	2.23
45-54	6392	3155	3237	6468	3115	3353	1.19	(–)1.27	3.58
55-64	5588	2587	3001	6611	3147	3464	18.31	21.65	15.43
65+	6447	2545	3902	7798	3113	4685	20.96	22.32	20.07
All ages	47099	22718	24381	53734	25878	27856	14.09	13.91	14.25

BAILIWICK BY ISLANDS

	Guernsey (inc. Herm and Jethou)						Alderney						Sark (inc. Brecqhou)					
	1961			1971			1961			1971			1961			1971		
	Persons	*Male*	*Female*	*Persons*	*Male*	*Female*	*Persons*	*Male*	*Female*	*Persons*	*Male*	*Female*	*Persons*	*Male*	*Female*	*Persons*	*Male*	*Female*
0- 4	3572	1829	1743	3885	1928	1957	104	62	42	123	53	70	30	21	9	25	13	12
5- 9	3337	1726	1611	4187	2148	2039	120	69	51	104	50	54	24	14	10	33	16	17
10-14	3940	2006	1934	3927	1988	1939	108	57	51	90	48	42	27	13	14	27	16	11
15-24	5487	2737	2750	7654	3876	3778	159	88	71	174	82	92	60	28	32	57	26	31
25-34	5432	2675	2757	6157	3097	3060	194	117	77	182	98	84	67	34	33	78	34	44
35-44	5737	2810	2927	5888	2888	3000	204	109	95	202	103	99	70	36	34	64	39	25
45-54	6124	3038	3086	6149	2977	3172	183	80	103	243	108	135	85	37	48	76	30	46
55-64	5267	2436	2831	6228	2976	3252	206	98	108	279	123	156	115	53	62	104	48	56
65+	6172	2414	3758	7383	2914	4469	194	97	97	289	132	157	81	34	47	126	67	59
All ages	45068	21671	23397	51458	24792	26666	1472	777	695	1686	797	889	559	270	289	590	289	301

APPENDIX IIA

Population changes by comparing the 1971 and 1976 censuses:

GUERNSEY, HERM AND JETHOU

	PERSONS			MALES			FEMALES		
	1971	1976	% inc. or dec.	1971	1976	% inc. or dec.	1971	1976	% inc. or dec.
0-4	3885	3344	—13.9	1928	1735	—10.0	1957	1609	—17.8
5-9	4187	4007	—4.3	2148	1978	—7.9	2039	2029	—0.5
10-14	3927	4407	+12.2	1988	2284	+14.9	1939	2123	+9.5
15-24	7654	7973	+4.2	3876	4043	+4.3	3778	3930	+4.0
25-34	6157	7381	+19.9	3097	3701	+19.5	3060	3680	+20.3
35-44	5888	6259	+6.3	2888	3132	+8.5	3000	3127	+4.2
45-54	6149	6320	+2.8	2977	3021	+1.5	3172	3299	+4.0
55-64	6228	5995	—3.7	2976	2847	—4.3	3252	3148	—3.2
65+	7383	7951	+7.7	2914	3168	+8.7	4469	4783	+7.3
All ages	51458	53637	+4.2	24792	25909	+4.5	26666	27728	+4.0

The percentage changes of the various age groups need to be regarded with a measure of reserve, because like is not precisely being compared with like. The explanation for this is that the 1976 figures are those of the resident population while the 1971 figures are the census night population, i.e. residents and visitors.

However, it is not possible to identify visitors in each age group from the published information of the 1971 census. Furthermore, Alderney and Sark took no part in the 1976 census, so that the proportion of the 2,263 visitors enumerated in the 1971 census of the Bailiwick which was counted in Guernsey, Herm and Jethou cannot be established either. It would certainly have been a majority, but it is thought better to record the facts than to subtract an estimated number of visitors.

To bring the problem into perspective, all the visitors enumerated in the 1971 census represent only 4.4 per cent of the 1971 enumeration for Guernsey, Herm and Jethou alone, so the actual proportion was certainly less.

(Total visitors, Bailiwick, 1971 census 2263. Males 1132: Females 1131).

APPENDIX III

DEATHS BY AGE GROUPS-SUMMARY 1978

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP 1																			
	Infective and Parasitic Diseases	-	-	-	-	-	-	-	-	1	-	-	1	-	1	-	-	1	2	3
	GROUP II																			
	Neoplasms	-	-	-	-	1	-	-	-	1	2	17	15	30	17	22	26	71	60	131
	GROUP III																			
	Endocrine, Nutritional, and Metabolic Diseases	-	-	-	-	-	-	-	-	-	-	1	1	-	-	1	2	2	3	5
	GROUP IV																			
	Diseases of the Blood and Blood forming Organs	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	1	3	4
	GROUP V																			
	Mental Disorders	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1	1	2	3
	GROUP VI																			
	Diseases of the Nervous System and Sense Organs	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	2	-	2
	Carried forward	1	-	-	-	1	-	-	-	2	2	20	18	31	19	23	31	78	70	148

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	1	-	-	-	1	-	-	-	2	2	20	18	31	19	23	31	78	70	148
	GROUP VII																			
	Diseases of the Circulatory System	-	-	-	-	-	-	-	-	4	-	31	11	31	30	62	125	128	166	294
	GROUP VIII																			
	Diseases of the Respiratory System	1	-	-	-	1	-	1	-	1	-	4	-	5	4	16	23	29	27	56
	GROUP IX																			
	Diseases of the Digestive System	-	-	-	-	-	-	-	-	-	1	2	5	2	2	2	-	6	8	14
	GROUP X																			
	Diseases of the Genito-Urinary System	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	4	2	5	7
	GROUP XIII																			
	Diseases of the Musculoskeletal System and Connective Tissue	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
	GROUP XIV																			
	Congenital Anomalies	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	Carried forward	2	-	1	-	2	-	1	-	7	3	58	34	69	57	104	183	244	277	521

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	2	-	1	-	2	-	1	-	7	3	58	34	69	57	104	183	244	277	521
	GROUP XV																			
	Certain Causes of Perinatal Morbidity and Morality	1	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	4
	GROUP XVI																			
	Symptons and Ill-defined Conditions	1	-	-	-	-	-	-	-	-	-	-	-	-	-	5	10	6	10	16
	GROUP NXVII																			
	Accidents, Poisonings and Violence (Nature of Injury)	1	1	-	1	-	-	5	-	6	2	6	1	2	-	-	1	20	6	26
		5	4	1	1	2	-	6	-	13	5	64	35	71	57	69	194	271	296	567

APPENDIX IIIA DEATHS (Exclusive of Foetal Deaths) - Cross Classified by Cause and Sex, Registered 1976 - 1978

		1976			1977			1978		
		M	F	Total	M	F	Total	M	F	Total
GROUP I	Infective and parasitic diseases	3	2	5	1	3	4	1	2	3
GROUP II	Neoplasms	70	69	139	98	60	158	71	60	131
GROUP III	Endocrine, Nutritional and Metabolic diseases	2	5	7	3	3	6	2	3	5
GROUP IV	Diseases of the Blood and Blood Forming Organs	-	-	-	1	3	4	1	3	4
GROUP V	Mental Disorder	-	1	1	3	3	6	1	2	3
GROUP VI	Diseases of the Nervous System and Sense Organs	3	1	4	4	1	5	2	-	2
GROUP VII	Diseases of the Circulatory System	141	174	315	143	174	317	128	166	294
GROUP VIII	Diseases of the Respiratory System	46	26	72	37	31	68	29	27	56
GROUP IX	Diseases of the Digestive System	9	8	17	4	9	13	6	8	14
GROUP X	Diseases of the Genito-Urinary System	4	2	6	2	2	4	2	5	7
GROUP XI	Complications of Pregnancy, Childbirth and the puerperium	-	-	-	-	-	-	-	-	-
GROUP XII	Diseases of the Skin and Subcutaneous Tissue	-	-	-	-	1	1	-	-	-
GROUP XIII	Diseases of the Musculoskeletal System and Connective Tissue	1	-	1	2	-	2	-	1	1
GROUP XIV	Congenital Anomalies	3	1	4	2	2	4	1	-	1
GROUP XV	Certain Causes of Perinatal Mortality	3	1	4	1	-	1	1	3	4
GROUP XVI	Symptoms and Ill-defined Conditions	2	10	12	1	6	7	6	10	16
GROUP XVII	Accidents, poisonings and Violence	14	5	19	11	6	17	20	6	26
	TOTALS:	301	305	606	313	304	617	271	296	567

APPENDIX IV

DEATHS BY AGE GROUPS AND CAUSES - 1978

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP I																			
	Infective and Parasitic Diseases																			
011	Pulmonary Tuberculosis	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
019	Late Effects of Tuberculosis	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
135	Sarcoidosis	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
	Totals: GRCUP I	-	-	-	-	-	-	-	-	1	-	-	1	-	1	-	-	1	2	3
	GROUP II																			
	Neoplasms																			
142	Malignant Neoplasms of Salivary Gland	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	2	2
146	Malignant Neoplasms of Oropharynx	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
147	Malignant Neoplasms of Nasapharynx	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
150	Malignant Neoplasms of Oesophagus	-	-	-	-	-	-	-	-	-	-	1	-	2	-	1	3	4	3	7
151	Malignant Neoplasms of Stomach	-	-	-	-	-	-	-	-	-	-	2	-	3	-	-	-	5	-	5
153	Malignant Neoplasms of Large Intestine, except Rectum	-	-	-	-	-	-	-	-	1	-	-	4	2	1	4	5	7	10	17
154	Malignant Neoplasms of Rectum and Rectosigmoid Junction	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	4	4
155	Malignant Neoplasms of Liver and Intrahepatic Bile ducts, specified as primary	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
157	Malignant Neoplasms of Pancreas	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2
160	Malignant Neoplasms of Nose, Nasal Cavities, Middle Ear and Accessory Sinuses	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
	Carried Forward:	-	-	-	-	-	-	-	-	1	1	4	5	8	3	7	12	20	21	41

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought Forward:	-	-	-	-	-	-	-	-	1	1	4	5	8	3	7	12	20	21	41
	GROUP II (Continued)																			
161	Malignant Neoplasms of Larynx	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
162	Malignant Neoplasms of Trachea, Bronchus and Lung	-	-	-	-	-	-	-	-	-	-	8	2	15	2	5	2	28	6	34
170	Malignant Neoplasms of Bone	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	1
172	Malignant Neoplasms of Skin	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	3	3
174	Malignant Neoplasms of Breast	-	-	-	-	-	-	-	-	-	-	-	2	-	3	-	5	-	10	10
180	Malignant Neoplasms of Cervix	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
182	Other Malignant Neoplasms of Uterus	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	-	3	3
183	Malignant Neoplasms of Ovary, Fallopian Tube and Broad Ligament	-	-	-	-	-	-	-	-	-	-	-	3	-	3	-	2	-	8	8
185	Malignant Neoplasms of Prostate	-	-	-	-	-	-	-	-	-	-	-	-	3	-	3	-	6	-	6
187	Malignant Neoplasms of Other and unspecified Male Genital Organs	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
191	Malignant Neoplasms of Brain	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
192	Malignant Neoplasms of Other Parts of Nervous System	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
194	Malignant Neoplasms of other Endrocine Glands	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
198	Other Secondary Malignant Neoplasms	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
199	Malignant Neoplasms without specification of site	-	-	-	-	-	-	-	-	-	-	1	-	1	2	3	2	5	4	9
200	Lymphosarcoma and Reticulum Cell Sarcoma	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
202	Other Neoplasms of Lymphoid Tissues	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
203	Multiple Myeloma	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	-	3	-	3
205	Myeloid Leukaemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
207	Other and unspecified Leukaemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
208	Polycythaemia Vera	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
222	Benign Neoplasms of Male Genital Organ	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
	Totals: GROUP II	-	-	-	-	1	-	-	-	1	2	17	15	30	17	22	26	71	60	131

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-54		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP III																			
	Endocrine, Nutritional and Metabolic Diseases																			
250	Diabetes Mellitus	-	-	-	-	-	-	-	-	-	-	1	1	-	-	1	2	2	3	5
	Totals: GROUP III	-	-	-	-	-	-	-	-	-	-	1	1	-	-	1	2	2	3	5
	GROUP IV																			
	Diseases of Blood and Blood Forming Organs																			
281	Other Deficiency Anaemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
283	Acquired Haemolytic Anaemia	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
284	Aplastic Anaemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
285	Other and unspecified Anaemia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
	Totals: GROUP IV	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2	1	3	4
	GROUP V																			
	Mental Disorders																			
290	Senile and Pre-Senile Dementia	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	1	1	2
293	Psychosis Associated with other Cerebral condition	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
	Totals: GROUP V	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1	1	2	3
	GROUP VI																			
	Diseases of the Nervous System and Sense Organs																			
348	Motor Neurone Disease	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	2	-	2

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total 1978
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	GROUP VII																			
	Diseases of the Circulatory System																			
393	Diseases of Pericarditis	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
394	Diseases of Mitral Valve	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
395	Diseases of Aortic Valve	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	1	2	1	3
396	Diseases of Mitral and Aortic Valves	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
398	Other Heart Diseases, specified as Rheumatic	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	2
402	Hypertensive Heart Disease	-	-	-	-	-	-	-	-	-	-	2	-	1	-	2	2	5	2	7
403	Hypertensive Renal Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
410	Acute Myocardial Infarction	-	-	-	-	-	-	-	-	2	-	19	5	8	13	13	27	42	45	87
411	Other Acute and Sub-Acute forms of Ischaemic Heart Disease	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
412	Chronic Ischaemic Heart Disease	-	-	-	-	-	-	-	-	-	-	7	1	7	3	15	19	29	23	52
421	Acute and Sub-Acute Endocarditis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
422	Acute Myocarditis	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
423	Chronic Disease of Pericardium, non-rheumatic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
424	Chronic Disease of Endocardium	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
425	Cardiomyopathy	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
426	Pulmonary Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	2
427	Symptomatic Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	8	2	8	10
428	Other Myocardial Insuffiency	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	1	2	3
429	Ill defined Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
431	Cerebral Haemorrage	-	-	-	-	-	-	-	-	-	-	2	2	1	2	4	6	7	10	17
433	Cerebral Thrombosis	-	-	-	-	-	-	-	-	-	-	-	-	2	3	4	8	6	11	17
434	Cerebral Embolism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	1	3
436	Acute but ill-defined Cerebrovascular Disease	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	4	1	6	7
437	Generalised Ischaemic Cerebrovascular Disease	-	-	-	-	-	-	-	-	-	-	-	-	2	1	8	21	10	22	32
	Carried Forward:	-	-	-	-	-	-	-	-	5	-	31	9	26	25	53	104	115	138	253

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought Forward:	-	-	-	-	-	-	-	-	5	-	31	9	26	25	53	104	115	138	253
	GROUP VII (Continued)																			
440	Arteriosclerosis	-	-	-	-	-	-	-	-	-	-	-	2	2	3	8	20	10	25	35
441	Aortic Aneurysm (non syphilitic)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2
450	Pulmonary Embolism and Infarction	-	-	-	-	-	-	-	-	-	-	-	-	2	1	-	1	2	2	4
	Totals: GROUP VII	-	-	-	-	-	-	-	-	5	-	31	11	30	29	62	126	128	166	294
	GROUP VIII																			
	Diseases of the Respiratory System																			
480	Viral Pneumonia	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
481	Pneumococcal Pneumonia	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	1	1	2
485	Bronchopneumonia, unspecified	-	-	-	-	-	-	-	-	-	-	1	-	1	-	7	15	9	15	24
486	Pneumonia, unspecified	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	4	2	4	6
490	Bronchitis, unspecified	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
491	Chronic Bronchitis	-	-	-	-	-	-	-	-	-	-	1	-	1	2	7	1	9	3	12
492	Emphysema	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	2	-	2
493	Asthma	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	2	-	2
511	Pleurisy	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
514	Pulmonary Congestion and Hypostasis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	-	3	3
517	Other Chronic Interstitial Pneumonia	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
518	Bronchiectasis	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	1
	Totals: GROUP VIII	1	-	-	-	1	-	1	-	1	-	4	-	4	4	17	23	29	27	56

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP IX																			
	Diseases of the Digestive System																			
531	Ulcer of Stomach	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	1	1	2
533	Peptic Ulcer, site unspecified	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
560	Intestinal Obstruction without mention of Hernia	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
570	Acute and Sub-acute Necrosis of Liver	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
571	Cirrhosis of Liver	-	-	-	-	-	-	-	-	-	1	1	1	2	1	1	-	4	3	7
574	Cholelithiasis	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
577	Disease of Pancreas	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
	Totals: GROUP IX	-	-	-	-	-	-	-	-	-	1	2	5	2	2	2	-	6	8	14
	GROUP X																			
	Diseases of Genito-Urinary System																			
590	Infections of Kidney	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	4	2	4	6
593	Other Diseases of Kidney and Ureter	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
	Totals: GROUP X	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	4	2	5	7
	GROUP XIII																			
	Diseases of the Musculoskeletal System and Connective Tissue																			
712	Rheumatoid Arthritis and Allied Conditions	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1
	Totals: GROUP XIII	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP XIV																			
	Congenital Anomalies																			
742	Congenital Hydrocephalus	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	Totals: GROUP XIV	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	GROUP XV																			
	Certain Causes of Perinatal Morbidity and Mortality																			
776	Anoxic and Hypoxic conditions not elsewhere classified	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
777	Immaturity, unqualified	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	3
	Totals: GROUP XV	1	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	4
	GROUP XVI																			
	Symptoms and Ill-defined Conditions																			
794	Senility without mention of Psychosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	10	5	10	15
795	Sudden death (cause unknown)	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	Totals: GROUP XVI	1	-	-	-	-	-	-	-	-	-	-	-	-	-	5	10	6	10	16

For details of the External Cause of the Injuries in this Group see Appendix V.

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total 1978
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	GROUP NXVII Accidents, Poisonings and Violence (Nature of Injury)																			
N800	Fracture of Vault of Skull	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
N801	Fracture of Base of Skull	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	1
N803	Other and Unqualified Skull Fractures	-	-	-	-	-	-	1	-	1	-	1	-	-	-	-	-	3	-	3
N804	Multiple Fractures involving Skull or face with other bones	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
N808	Fracture of Pelvis	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
N862	Injury to other and unspecified Intrathoracic Organs	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
N864	Injury to Liver	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
N869	Internal Injury, unspecified or involving Intrathoracic and Intra-Abdominal Organs	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	1	1	2
N933	Foreign Body in Pharynx and Larynx	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
N948	Burn involving Face, Head and Neck, with Trunk and Limb(s)	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
N965	Adverse Effect of Analgesics and Antipyretics	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
N967	Adverse Effect of other Sedatives and Hypnotics	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
N970	Adverse Effect of Psychotherapeutics	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
N980	Toxic Effect of Alcohol	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	2	-	2
	Carried forward	1	1	-	1	-	-	3	-	5	1	5	1	-	-	-	-	14	4	18

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	1	1	-	1	-	-	3	-	5	1	5	1	-	-	-	-	14	4	18
N986	Toxic Effect of Carbon Monoxide	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	2	-	2
N991	Effects of Reduced Temperature	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
N994	Effects of Other External Causes	-	-	-	-	-	-	1	-	1	1	1	-	-	-	-	-	3	1	4
N998	Other Complications of Surgical Procedures	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
	Totals Group NXVII	1	1	-	1	-	-	5	-	6	2	6	1	1	-	1	1	20	6	26

APPENDIX V

ACCIDENTS, POISONINGS AND VIOLENCE-EXTERNAL CAUSE OF DEATH

(the deaths detailed below are included in APPENDIX IV categorised under the NATURE OF THE INJURY)

Intern List No.	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP EXVII																			
	Accidents, Poisonings & Violence - External Cause of Death.																			
E812	Motor vehicle traffic accident involving collision with other motor vehicle	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
E814	Motor vehicle traffic accident involving collision with pedestrian	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
E815	Other motor vehicle traffic involving collision	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	1
E816	Non collision motor vehicle accident due to loss of control	-	-	-	-	-	-	1	-	1	-	1	-	-	-	-	-	3	-	3
E818	Other non collision motor vehicle traffic accident	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
E832	Other accidental submersion or drowning in water transport	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	1
E836	Machinery accident in water transport	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
	Carried forward	-	-	-	1	-	-	3	-	2	1	2	-	-	-	-	-	7	2	9

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	-	-	-	1	-	-	3	-	2	1	2	-	-	-	-	-	7	2	9
E881	Fall on or from ladders or scaffolding	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
E883	Fall into hole or other opening in surface	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	2	-	2
E890	Accident caused by conflagration in private dwelling	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	2	-	2
E910	Accidental drowning and submersion	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
E911	Inhalation and ingestion of food causing obstruction or suffocating	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1
E913	Accidental mechanical suffocation	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1
E943	Late effect of accidental fall	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
E947	Late effect of surgical operation	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1
E950	Suicide and self inflicted poisoning by solid or liquid substances	-	-	-	-	-	-	-	-	1	-	1	1	-	-	-	-	2	1	3
E954	Suicide and self inflicted injury by submersion (drowning)	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	1
E958	Suicide and self inflicted injury by other and unspecified means	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
E983	Hanging and strangulation, undetermined whether accidentally or purposely inflicted	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	Carried forward	1	1	-	1	-	-	5	-	5	2	6	1	2	-	-	1	19	6	25

Inform List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	1	1	-	1	-	-	5	-	5	2	6	1	2	-	-	1	19	6	25
E988	Injury by other and unspecified means undetermined whether accidentally or purposely inflicted	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
	Group Total EXVII	2	1	-	1	-	-	5	-	5	2	6	1	2	-	-	1	20	6	26

APPENDIX VI

NON-RESIDENT DEATHS - GUERNSEY 1978 (Not included in Main Table on Vital Statistics)

Group	International List No.	Total All Ages M	Total All Ages F	1978 Grand Total	Under 1 M	Under 1 F	40-44 M	40-44 F	45-49 M	45-49 F	50-54 M	50-54 F	55-59 M	55-59 F	60-64 M	60-64 F	65-69 M	65-69 F	70-74 M	70-74 F	75-79 M	75-79 F	80-84 M	80-84 F
II	154	1	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
	162	1	-	1	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-
	185	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
VII	395	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
	402	3	-	3	-	-	-	-	1	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-
	410	9	2	11	-	-	-	-	1	-	-	-	4	-	2	-	-	2	1	-	-	-	1	-
	412	-	2	2	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-
	431	1	-	1	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	436	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-
	440	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
	441	2	-	2	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	-
	442	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-
	450	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
	453	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-
VIII	486	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
	491	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-
IX	562	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
	571	1	1	2	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-
XII	682	-	1	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-
XV	777	2	-	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
		26	10	36	2	-	-	1	3	1	1	1	7	-	4	-	4	3	2	2	1	-	2	2

NOTE: For explanation of the International List No. please refer to Main Table at Appendix IV.

APPENDIX VII

MORTALITY - CANCER (all forms)

Deaths by sex and rates per thousand resident population.

	PERSONS		MALE		FEMALE	
Year	Deaths	Rate/1,000	Deaths	Rate/1,000	Deaths	Rate/1,000
1961	98	2.23	40	1.89	58	2.54
62	117	2.62	62	2.88	55	2.37
63	100	2.20	60	2.75	40	1.70
64	100	2.17	51	2.30	49	2.05
65	104	2.22	65	2.89	39	1.61
66	127	2.68	72	3.15	55	2.23
67	114	2.37	68	2.94	46	1.84
68	124	2.54	69	2.94	55	2.17
69	121	2.44	63	2.64	58	2.26
1970	91	1.81	59	2.44	32	1.23
71	149	2.93	88	3.59	61	2.31
72	131	2.55	74	2.99	57	2.13
73	129	2.48	65	2.60	64	2.37
74	137	2.61	69	2.72	68	2.50
75	142	2.67	77	3.01	65	2.37
76	139	2.60	70	2.70	69	2.49
77	158	2.91	98	3.74	60	2.14
78	131	2.41	71	2.71	60	2.14

GUERNSEY - Cancer - all forms - five year averages + last 3 years.

	PERSONS		MALE		FEMALE	
	Cases	Rate/1000	Cases	Rate/1000	Cases	Rate/1000
1961-65	103.8	2.29	55.6	2.54	48.2	2.05
1966-70	115.4	2.37	66.2	2.82	49.2	1.95
1971-75	137.6	2.65	74.6	2.98	63.0	2.33
76	139	2.60	70	2.70	69	2.49
77	158	2.91	98	3.74	60	2.14
78	131	2.41	71	2.71	60	2.14

APPENDIX VII A

MORTALITY - Cancer of Trachea, Bronchus and Lung.

Guernsey deaths and rates per million resident population, compared with rates per million published for England and Wales. (England and Wales data from O.P.C.S. Quarterly publication "Publication Trends").

(Rate/M = Rate per million)

	PERSONS			MALE			FEMALE		
Year	Deaths	Rate/M Guernsey	Rate/M E & W	Deaths	Rate/M Guernsey	Rate/M E & W	Deaths	Rate/M Guernsey	Rate/M E & W
1961	14	318		11	520	869	3	131	139
62	28	626		22	1,023	893	6	259	144
63	28	617		27	1,237	907	1	43	151
64	19	412		15	677	930	4	167	159
65	22	470		22	978	960	0	-	168
66	29	611		20	876	969	9	365	177
67	26	540		24	1,036	1,002	2	80	188
68	21	430		18	766	1,012	3	118	198
69	23	464		20	839	1,040	3	117	202
1970	20	398		18	745	1,045	2	77	214
71	39	766		36	1,470	1,067	3	114	228
72	37	719	646	31	1,252	1,080	6	225	234
73	32	615	654	26	1,038	1,088	6	223	243
74	30	571	670	22	869	1,105	8	294	262
75	32	603	668	25	976	1,090	7	255	269
76	28	522	682	22	849	1,110	6	216	265
77	40	737	690	34	1,297	1,120	6	214	290
78	34	626	*	28	1,067	*	6	214	*

GUERNSEY - Cancer of Trachea, Bronchus and Lung.

5 year averages and last 3 years compared with England and Wales.

	MALES			FEMALES		
	GUERNSEY		E & W	GUERNSEY		E & W
	Deaths	Rate/mill.	Rate/mill.	Deaths	Rate/mill.	Rate/mill.
1961-65	19.4	887	912	2.8	120	152
1966-70	20.0	852	1,014	3.8	151	196
1971-75	28.0	1,121	1,086	6.0	222	247
76	22	849	1,110	6	216	265
77	34	1,298	1,120	6	214	290
78	28	1,068	*	6	214	*

* Not available.

APPENDIX VIII

INFANT DEATHS 1978—CAUSES

Cause of Infant Deaths—Age under one month—1978.

International Classification		*M*	*F*	*Total*
776	Anoxic and hypoxic conditions not elsewhere classified	1	2	3
777	Immaturity, unqualified	—	1	1
		1	3	4

Cause of Infant Deaths—Age from one month to one year—1978.

International Classification		*M*	*F*	*Total*
348	Motor Neorone Disease	1	—	1
480	Viral Pneumonia	1	—	1
795	Sudden Death (cause unknown)	—	1	1
E911	Inhalation and ingestion of food causing obstruction or suffocation	—	1	1
E988	Injury or other and unspecified means undetermined whether accidentally or purposely inflicted	1	—	1
		3	2	5

APPENDIX VIIIA

INFANT MORTALITY RATES IN SELECTED COUNTRIES 1960 & 1971

		1960	1971
1.	SWEDEN	16.6	11.1
2.	NETHERLANDS	17.9	12.1
3.	NORWAY	18.9	12.8
4.	AUSTRALIA	20.2	17.3
5.	FINLAND	21.0	12.6
6.	SWITZERLAND	21.1	14.4
7.	DENMARK	21.5	13.5
8.	ENGLAND & WALES	21.8	17.5
9.	NEW ZEALAND	22.6	16.5
10.	U.S.A.	26.0	19.1
11.	SCOTLAND	26.4	19.9
12.	N. IRELAND	27.2	22.7
13.	CANADA	27.3	17.5
14.	FRANCE	27.4	17.1
15.	JAPAN	30.7	12.4
16.	BULGARIA	45.1	24.9
17.	YUGOSLAVIA	87.8	49.5

SOURCE: O.P.C.S.

RATES FROM: W.H.O. Annual Statistics

EXTRACTED FROM: HC(76)40 APP. III (Aug. '76 D.H.S.S.)

GUERNSEY—INFANT MORTALITY (during same period)

1960	14.3 (per 1,000 live births)	1966	16.6 (per 1,000 live births)
1961	21.1	1967	28.3
1962	17.6	1968	21.3
1963	28.5	1969	16.9
1964	21.3	1970	16.4
1965	19.6	1971	13.0

1977—8.5 per 1,000 live births

GUERNSEY—INFANT MORTALITY—FIVE YEAR AVERAGES

1960-64	20.6 per 1,000 live births
1965-69	20.5
1970-74	15.5

APPENDIX IX

Annual Statistics for Health Visitors 1978

		1978	1977
	Pre-School children (5208 visits)		
1.	Primary visits age 0-1 year	499	518
2.	Primary visits age 1-5 years	229	12
3.	Revisits age 0-1 year	2728	1634
4.	Revisits age 1-5 years	1748	1438
5.	Visits relating to the handicapped	4	24
6.	Observation Register	—	4
	School children (139 visits)		
7.	Home visits	121	153
8.	School visits	5	16
9.	Handicapped	13	9
10.	Other	—	2
	General Health Visiting (2350 visits)		
11.	Problem families and families with problems	257	154
12.	Relating to mental health	64	66
13.	Relating to physically handicapped persons	64	29
14.	Infectious households (tuberculosis)	21	15
15.	Infectious households (other)	3	20
16.	Geriatric cases	265	318
17.	Visits with doctors	11	3
18.	Visits with Public Health Inspectors	17	6
19.	Visits relating to ante-natal cases	137	107
20.	Visits to hospitals and nursing homes	24	40
21.	Miscellaneous and unspecified	551	701
22.	Evening visits	39	59
23.	No access (i.e. non-effective visits)	897	788
	Clinics (666 sessions)		
24.	Ante-natal (booking) clinic	66	58
25.	Parentcraft and relaxation classes (93 classes)	186	186
26.	Infant Welfare Clinics	195	164
27.	Child health (Sessions)	219	99
28.	B.C.G. (and poliomyelitis immunisations)	—	2
29.	Other and unspecified clinics	—	5
	Meetings (263 sessions)		
30.	Within Health Department staff	139	38
31.	With group practices	104	72
32.	Miscellaneous	20	18
	B.C.G. Programme (142 visits)		
33.	Home visits	24	27
34.	M.P.T. and M.P.T. readings	67	30
35.	B.C.G. visits	51	38
36.	Other	—	2
	Health Education		
37.	Sessions	35	58
	Administration (510 sessions)		
38.	Organisation and administration	286	281
39.	Interviews at Lukis House	109	154
40.	Courses, conferences, Obstetric Committee etc.	115	43

APPENDIX IX A

Infant Welfare Clinics 1978

Number of Clinics held and Number of Children seen by Health Visitors at these Clinics.

Number of Clinics held		*Children seen*	
		0-1 *year*	1-5 *years*
Brock Road	22	761	316
Cobo	31	1092	435
St. John's	23	292	91
St. Peter's	24	413	234
St. Saviour's	24	206	95
St. Martin's	22	423	64
L'Islet	11	300	51
Lukis House	27	129	9
Vale	11	283	92
	195	3,899	1,387

Total of children seen by the Health Visitors ... ... 5,286 (a plus of 1270 on 1977)

1977	166	3,016	950

In addition Health Visitors hold Parentcraft and Relaxation classes each Thursday Morning and Afternoon. During 1978 a total of 96 classes were held, attended by 318 mothers.

In 1977 a total of 296 mothers attended these classes.

During 1978 an infants clinic was opened every Friday morning in the Community Nurses Centre at Lukis House. Attendances have grown steadily and so it is believed that this service is coming to be appreciated and likely to become a regular feature.

APPENDIX X

SPECIAL TREATMENT CLINIC—MALE SECTION, 1978

1. Number of persons under treatment or surveillance on 1st January:

(*a*) Syphilis	6		
(*b*) Gonorrhoea	3		
(*c*) Non-specific urethritis	4		
(*d*) Other sexually transmitted conditions	0		
(*e*) Miscellaneous conditions	0	13	TOTAL

2. Number of fresh infections during the year:

	A	B	C	D	E	TOTALS
(*a*) Syphilis	0	0	1	0	0	1
(*b*) Gonorrhoea	13	5	0	3	3	24
(*c*) Non-specific urethritis	15	3	0	6	2	26
(*d*) Other sexually transmitted conditions	40	3	4	1	2	50
(*e*) Miscellaneous conditions	n/a	n/a	n/a	n/a	n/a	31

Contracted: A between residents locally
B between residents and non-residents locally
C by residents outside the Island
D by non-residents outside the Island
E between non-residents locally

3. Cases discharged:

(*a*) Syphilis	5		
(*b*) Gonorrhoea	27		
(*c*) Non-specific urethritis	30		
(*d*) Other sexually transmitted conditions	50		
(*e*) Miscellaneous conditions	31	143	TOTAL

4. Number of persons remaining under treatment or surveillance on 31st December 1978:

(*a*) Syphilis	2		
(*b*) Gonorrhoea	0		
(*c*) Non-specific urethritis	0		
(*d*) Other sexually transmitted conditions	0		
(*e*) Miscellaneous conditions	0	2	TOTAL
		145	GRAND TOTAL

5. Number of attendances: 330.

6. Of the total at 2 above: the following were re-infections 1

7. Classification: New cases (to agree with 2 above)

	Syphilis	G.C.	N.S.U.	Other S.T.D.	Misc.
Residents	1	13	17	34	13
Visitors	—	2	1	0	0
Visiting seamen	—	7	0	1	3
Imported Labour—hotel staff	—	0	2	6	7
—horticulture	—	2	0	2	0
—other	—	0	6	7	8
TOTAL	1	24	26	50	31

8. Age Groups: New cases (to agree with 2 above)

	Under 16	16/19	20/29	30/39	40+	Total
(*a*) Syphilis	0	0	0	1	0	1
(*b*) Gonorrhoea	0	5	17	2	0	24
(*c*) Non-specific urethritis	0	2	17	6	1	26
(*d*) Other ST conditions	0	5	37	6	2	50
(*e*) Miscellaneous conditions	0	1	24	4	2	31
TOTAL	0	13	95	19	5	132

APPENDIX XI

SPECIAL TREATMENT CLINIC—FEMALE SECTION, 1978

1. Number of persons under treatment or surveillance on 1st January:

(*a*) Syphilis	8		
(*b*) Gonorrhoea	0		
(*c*) Non-specific conditions	0		
(*d*) Other sexually transmitted conditions	0		
(*e*) Miscellaneous conditions	0	8	TOTAL

2. Number of fresh infections during the year:

	A	B	C	D	E	TOTALS
(*a*) Syphilis	0	0	0	0	0	0
(*b*) Gonorrhoea	3	2	2	1	0	8
(*c*) Non-specific conditions	1	0	0	0	1	2
(*d*) Other sexually transmitted conditions	7	2	3	2	2	16
(*e*) Miscellaneous conditions	n/a	n/a	n/a	n/a	n/a	11

Contracted: A between residents locally
B between residents and non-residents locally
C by residents outside the Island
D by non-residents outside the Island
E between non-residents locally

3. Cases discharged:

(*a*) Syphilis	8		
(*b*) Gonorrhoea	8		
(*c*) Non-specific urethritis	2		
(*d*) Other sexually transmitted conditions	16		
(*e*) Miscellaneous conditions	11	45	TOTAL

4. Number of persons remaining under treatment or surveillance on 31st December 1978:

(*a*) Syphilis	0		
(*b*) Gonorrhoea	0		
(*c*) Non-specific urethritis	0		
(*d*) Other sexually transmitted conditions	0		
(*e*) Miscellaneous conditions	0	0	TOTAL
		45	GRAND TOTAL

5. Number of attendances: 82.

6. Of the total at 2 above: the following were re-infections: 0

7. Classification: New cases (to agree with 2 above)

	Syphilis	G.C.	N.S.U.	Other S.T.D.	Misc.
Residents	0	5	1	11	5
Visitors	0	0	0	0	0
Visiting seaman	0	0	0	0	0
Imported Labour—hotel staff	0	3	1	5	4
—horticulture	0	0	0	0	1
—other	0	0	0	0	1
TOTAL	0	8	2	16	11

8. Age Groups: New cases (to agree with 2 above)

	Under 16	16/19	20/29	30/39	40+	Total
(*a*) Syphilis	0	0	0	0	0	0
(*b*) Gonorrhoea	0	1	7	0	0	8
(*c*) Non-specific urethritis	0	1	1	0	0	2
(*d*) Other ST conditions	0	4	12	0	0	16
(*e*) Miscellaneous conditions	0	5	6	0	0	11
TOTAL	0	11	26	0	0	37

APPENDIX XII - ALDERNEY DEATHS

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	GROUP II																			
	Neoplasms																			
162	Malignant Neoplasm of Trachea, Bronchus and Lung	-	-	-	-	-	-	-	-	-	-	2	1	1	-	2	-	5	1	6
	Totals Group II	-	-	-	-	-	-	-	-	-	-	2	1	1	-	2	-	5	1	6
	GROUP VII																			
	Diseases of the Circulatory System																			
410	Acute Myocardial Infarction	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	2	-	2
412	Chronic Ishaemic Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	2	1	3	4
425	Cardiomyopathy	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	1
431	Cerebral Haemorrhage	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
433	Cerebral Thrombosis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	2	-	2
	Totals Group VII	-	-	-	-	-	-	-	-	-	-	2	1	2	1	2	2	6	4	10
	GROUP VIII																			
	Diseases of the Respiratory System																			
485	Bronchopneumonia, Unspecified	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	1	3
	Totals Group VIII	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	1	3
	GROUP X																			
	Diseases of the Male Genitalurinary System																			
600	Hyperplasia of Prostate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
	Totals Group X Carried forward	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1

Intern List No	Cause of Death	Under 1		1-4		5-14		15-24		25-44		45-64		65-74		75+		Total all ages		Grand Total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	1978
	Brought forward	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1
	GROUP NXVII Accidents, Poisons and Violence (Nature of Injury)																			
N967	Adverse effect of other sedatives and hypnotics	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	1	1	2
	Total Group NXVII	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	1	1	2

SCHOOL MEDICAL SERVICES ANNUAL REPORT 1978

Mr Chairman, Ladies and Gentlemen,

I beg to submit the Annual Report for the year 1978.

Dickens portrays with chilling clarity some of the harsher aspects of the school system in his day when education was still a privilege even though a painful one for some pupils. There have been steady improvements made in the level of schooling since education became compulsory for all. At the same time there has grown a gradual awareness of the need for expertise in coping with the problem of educating the child who has special handicaps whether these be intellectual, emotional or physical. Nowadays a better understanding exists of the variety of individual capacity and greater possibilities for integrating the unusual pupil into the group. Thus, although much remains to be done, we are entering a period where there is gradually increasing knowledge of the needs of the individual pupil, especially of those whose capacity for learning is impaired.

The maintenance and development of the School Medical Service in Guernsey must therefore be a continual process well into the foreseeable future in order to keep pace with the requirements of the Educational system.

The work of the School Medical Service can be defined not only as prevention but also early detection of handicap and departure from normal development, together with advice to parents, teachers and others responsible for children with a particular concern for the handicapped.

The major achievement in prevention has been the success story of immunisation, a task shared with the family doctors.

Early detection of handicap in the Pre-school child is obtained by arranging Developmental Clinics at Lukis House. Screening tests are carried out on the well baby and toddler by the Health Visitor and those deemed to have or at risk of acquiring problems are referred for assessment by the school doctor. At the latter clinic, strengths and weaknesses of the child are identified. Referral might be made back to the family doctor for treatment or to one of the Specialised Clinics at Lukis House for further assessment or a training programme is devised for the mother to carry out at home.

Where it is thought necessary, a mother is invited to bring her child for a series of appointments where his developmental pattern can be followed and analysed.

Where it is thought a child is in need of special educational facilities then a referral is made to the Educational Psychologist. She, in turn, assesses and gives the decision as to whether or not to offer a place at the Longfields Centre for further observation, a place at Mont Varouf School or remedial education at the normal infant school. The parents are told that whatever decisions are made about placing a child are subject to continuous review.

In some cases it is necessary to round off a comprehensive assessment by seeking information from the social worker of a child whose parents are judged to be taking insufficient interest or initiative in preventive and therapeutic Services available on this Island.

It should be stressed that here in Guernsey there exists most effective and harmonious communications between the Educational, Social and School Medical Services and this facilitates the continuity of care for our children.

The school population of Guernsey in 1978 was 9,568—a reduction of 180 as compared with 1977.

It can be said broadly that the health of the school children is continually improving. One cannot say that this is due only to improved social conditions, nor to the actual contributions made by preventive medicine, but the combined influence of both.

This report will now outline the work of the School Medical Service during 1978 both at Lukis House and at the Schools. Statistics exist to indicate how busy have been the clinics held but not for the work done in the schools. One hopes that the Heads of the Island Schools feel that their needs for medical advice were met in a satisfactory way.

Clinic Attendances

1978		1977
1492	attendances recorded at Lukis House Clinics	1425
424	attendances recorded at Child Guidance Clinics	398
71	attendances recorded at Mr. Midgley's Clinic	56
3348	attendances recorded at Speech Therapy Clinic	3172
2673	attendances recorded at Orthoptic Clinic	2651
53	attendances recorded at B.C.G. Clinic	1
75	attendances recorded at Physiotherapy Clinic	86
8136	total number of attendances recorded	7789

In addition to the above, 2,450 school children were examined at the periodic medical examination (1,729 at their schools and 721 at Lukis House). In 1977 these figures were 1,826 at their schools and 651 at Lukis House making a total of 2,477.

Also 371 girls were vaccinated against German Measles in their schools whereas in 1977 the figure was 355.

THE PERIODIC MEDICAL EXAMINATIONS

The purpose of these examinations is to identify as early as possible, any departures from normal, and to ascertain where it occurs, any condition likely to interfere with normal learning and to ensure that appropriate advice and treatment is being obtained. At the same time advice can be given to parent, pupil or school of any health factors which may require special consideration during the whole or part of the pupil's school life.

Children are medically inspected during the last term of their first year at primary school (Infant or Entrant Examination) and they are next inspected during the middle term of their last year at Primary School (the Intermediate or Junior School examination). They are finally inspected during the first term of their fourth year at Secondary level of schooling (the Potential School Leaver or Senior examination).

In addition, the school doctors also visit the schools during the term and see children brought to their attention by parents, teachers and school nurses. This increases the effectiveness of the preventive work of the School Medical Service and enables both school doctor and nurse to work in close consultation with teachers and facilitates general observation of the children in the school environment.

Medical Examinations are normally carried out on school premises and the parents are invited and indeed encouraged to attend. One can predict that over 90% of mothers (but occasionally a father comes instead) will attend the Infant and Junior examinations whether they are employed outside the home or not. Fewer attend the Seniors examinations partly at the pupil's express wish and partly because the parent feels that there are no health problems to be discussed only the teenage ones that the pupil prefers to talk over without a parent being present. Nevertheless it has been noted that the past few years more and more mothers will come "just in case".

This senior examination is regarded as an opportunity to judge the level of maturity the pupil has reached and also his job prospects.

Now follows more detailed statistics of the number of children examined in 1978 with the various health defects noted and a comparison made with the figures obtained in 1977.

PERIODIC MEDICAL EXAMINATIONS

Numbers of children examined in school					*Children examined at Lukis House*			
Boys	*Girls*	*Total* 1978	*Total* 1977		*Boys*	*Girls*	*Total* 1978	*Total* 1977
346	275	621	733	Infants	29	30	59	59
345	389	734	713	Juniors	44	51	95	103
132	242	374	380	Seniors	343	224	567	489
823	906	1729	1826	Total	416	305	721	651

Defects noted at the Periodic Medical Examinations

	Infants			*Juniors*			*Seniors*		
	Boys	*Girls*	*Total*	*Boys*	*Girls*	*Total*	*Boys*	*Girls*	*Total*
Oral Hygiene	51	51	102	70	62	132	60	56	116
Eyes	23	30	53	58	81	139	63	124	187
Speech	57	28	85	21	7	28	11	3	14
Poor Posture	18	9	27	52	30	82	51	67	118
Flat Feet	27	27	54	41	47	88	74	46	120
Enlarged Glands	42	36	78	24	25	49	22	11	33
c/fwd.	218	181	399	266	252	518	281	307	588

	Infants			*Juniors*			*Seniors*		
	Boys	*Girls*	*Total*	*Boys*	*Girls*	*Total*	*Boys*	*Girls*	*Total*
b/fwd.	218	181	399	266	252	518	281	307	588
ENT Conditions	141	135	276	78	95	173	58	115	173
Asthma	3	5	8	5	6	11	8	8	16
Bed Wetting	19	9	28	8	7	15	7	6	13
Under/Over weight	8	9	17	20	31	51	17	19	36
Heart	9	10	19	7	7	14	22	10	32
Skin	31	25	56	15	22	37	60	43	103
Lungs	30	26	56	32	40	72	29	23	52
Total—1978	459	400	859	431	460	891	482	531	1013
Total—1977	378	374	752	450	401	851	344	335	679

Note the visual problem increasing with the age of the child—similarly postural defects, feet troubles and asthma, increase as the pupil matures.

Conversely one sees the ironing out of speech difficulties (a bigger problem in boys than in girls) and bedwetting improving as the child gets older.

Colds—giving rise to E.N.T. troubles and chestiness are seen at all ages.

Let us spare a sympathetic thought for the teenager's skin problems, for although this might seem to be minor to us—it is a major significance to the pupil.

SCHOOL CLINICS

The following statistics refer to the children either seen at Lukis House as a more leisurely examination is required or for assessment at a Specialised clinic.

1978		1977
692	Pre-school children attended for Developmental Testing	683
186	attended for visual defects	180
138	attended for ENT conditions	155
6	attended for speech defects	15
18	were training college candidates	14
9	attended with behavioural problems	8
20	attended for assessment re. future schooling	19
40	attended for routine school medicals (absentees)	52
72	attended for general medical examination	137
75	had orthopaedic problems	86
1256		1349

As a result of these clinics

1978		1977
126	children were referred to eye specialist	128
82	children were referred to G.P. for E.N.T. treatment	89
52	children were referred to Speech Therapy Clinics	78
15	children were referred by the Psysiotherapist to the family doctor	10
3	children were referred to the child guidance clinic	6
278		311

PROPHYLACTIC IMMUNISATIONS

(i) *The Tuberculosis Prevention Programme*

The prevalance of all forms of tuberculosis has been declining in this Island over the past few decades. This has been due to a variety of factors such as improved conditions in housing and places of work, improved economic conditions, programmes for BCG vaccination, contact tracing and supervision and new drugs which reduce the natural reservoir of infection.

All the Guernsey school entrants are skin tested (the tuberculin test) to see if they possess immunity to tuberculosis. Those that demonstrate this (the positive reactors) and their contacts are investigated further to find the reason for their immunity so that treatment can be started for those in need. All the children seen at the Junior School Medical examination are again tuberculin tested and the positive reactors and contacts are investigated and those in need are treated by their family doctors. The negative reactors—that is, those who are demonstrating absence of immunity to tuberculosis, are now offered a BCG vaccination so that protection against the disease is given before the onset of puberty which is a period when the child is at great risk to acquiring the infection.

All the records of the school children seen at the Senior routine medical are carefully scrutinised and those who have for some reason not yet been BCG vaccinated, are offered tuberculin testing and vaccination.

Lastly all children who received the BCG vaccination at birth or prior to school entry are offered tuberculin testing and a booster dose of BCG vaccine if required, at the time of the Senior routine medical examination.

Tuberculin Testing

	1978		1977	
	Infants	*Juniors*	*Infants*	*Juniors*
Total number of children	719	830	792	802
Tuberculin testing not required	107	75	130	95
Number of children eligible for testing	612	755	662	707
But number of absentees	19	34	17	1
Withheld for medical reasons	3	1	5	9
Parental permission withheld	20	9	13	9
Number of tuberculin tests performed	570	711	627	688

In addition 118 seniors were tuberculin tested.

BCG vaccinations

Of the 830 juniors tested 707 were found to be negative reactors and so were eligible for BCG vaccinations. Of these eligible, vaccination was withheld from 14 children either because the child was on such drug therapy as to suppress the effect of the BCG or the parents refused permission to immunise their children. 665 juniors were BCG'd in their schools and 28 (the absentees) vaccinated at Lukis House. This means that 98% juniors who had demonstrably no natural immunity against tuberculosis were given the BCG vaccination (in 1977, 644 juniors were BCG'd).

In addition to the Juniors, 118 senior school children were vaccinated against tuberculosis.

GERMAN MEASLES

(ii) This is usually a very mild illness that runs an uncomplicated course; in some cases it is so mild as to go unobserved. Justification for immunising against it lies in the fact that the Rubella virus may attack and cause permanent damage to developing organs in the foetus which is then born with often untreatable defects.

Because of these risks of foetal abnormalities schoolgirls in the first year at the Secondary level of schooling are offered vaccination against German Measles whether or not they think they have had the illness. In 1978, 371 schoolgirls were vaccinated by the School Medical Service. One child was advised against vaccination for medical reasons, two girls had already been vaccinated by their own doctor and 47 refusals were received. This gives a rate of 88.35% schoolgirls vaccinated against German Measles by the School Medical Services (89% in 1977).

(iii) *School Cruise*

A total of 110 school children accompanied by 11 adults embarked on a cruise to the Middle East in 1978. Of these children, 88 were vaccinated against Cholera and Polio.

HYGIENE INSPECTION

In 1978 the School Nurses inspected a total of 19,833 school children. As a result of these inspections 165 children were found to be infected with head lice.

This gives a rate per thousand of 8.3 (6.76 in 1977). It is disappointing that children are still found with head infestation, but even so the degree of individual infestation is much less nowadays and it is rare for a school child to be found with a heavy infestation of head lice. It is interesting to recall that the infestation rate per thousand in 1968 was also 8.3.

Free School Milk

A total of 150 school children received free milk in their schools.

During the year, 29 names were deleted from the list and 41 other children added to the scheme.

In addition 15 children received extra vitamins.

Vital Statistics

School children are both weighed and measured at the routine school medical examinations as this provides a useful guide to their medical progress. Selected children are weighed at more frequent intervals when their parents are requiring dietary advice. It is always interesting to work out the average height and weight of the children seen at the Senior School medical examination. The results for 1978 are as under:—

Girls	Average Height	5′ 3″
	Average Weight	114.5 lbs.
	Menses	12 years 10 months
Boys	Average Height	5′ 4½″
	Average Weight	116 lbs.

SCHOOL NURSES' SURVEY

This survey was taken amongst 14 years old boys and girls during the Senior routine school medicals. 869 children were asked if they would like to take part in a 'drinking and smoking' survey. 867 answered freely. One girl said she would like to take part as long as her father could see a copy of the questions. This was arranged, and her father helped her with the answers! One girl refused to take part on the grounds that her mother did not like the family answering any questions on their private life. We agree that this is a fair enough reason for abstention.

131 children smoked—i.e. 15%
59 girls
72 boys
77 children smoked under 5 cigarettes daily.
32 children smoked 10 cigarettes daily.
8 children smoked 15 cigarettes daily.
11 children smoked 20 cigarettes daily.
3 children smoked over 20 cigarettes daily.

Age Started Smoking

13 children claimed to have started smoking when under 10 years old.
26 started smoking at 10 years old.
54 started smoking at about 12 years old.
38 started smoking at 14 years old.

A large number of children who had started smoking and then given up, for various reasons, at about 14 years old, showed up on the survey as non-smokers. Out of the 131 children who smoked, 79 mothers smoked and 90 fathers. Asked whether this influenced them 54 said 'yes'.

so—60% of the smokers had a mother who smoked.
68% of the smokers had a father who smoked.

These figures may be misleading as in some cases both parents smoked, or neither. Some of the non-smokers had one or both parents who smoked and this had influenced them not to smoke. The permutations were endless and we did not have time to go into them all.

129 boys and girls said they would have a cigarette at a party, whilst 550 said they would have a drink.

This agrees with our last survey on drinking, that it is more sociably acceptable to drink than to smoke.

Some of the 129 who would smoke at a party were non-smokers, whilst some of the smokers said they would not have a cigarette at a party. Again there were a lot of permutations.

Out of the 550 children who drank at parties, nearly all hastened to say that they only had small amounts of alcohol, usually lager, shandy or wine, and that on many occasions parents were present. In fact the bottle parties that used to be held whilst parents were out, seem to be 'old hat', and a large number of these teenagers (They'll never believe this) only went to family parties.

All the smokers were asked why they started smoking. Apart from the 'don't knows' and the 'can't remembers', most of them started smoking to be 'grown up' or to 'show off' (their words) and then found it had become a habit.

Many of them smoked because they did not want to be the odd one out amongst their friends. Sadly a small number of them smoked because of their 'bad nerves', family troubles or the break-up of parent's marriages. Because of the nature of the survey we promised complete confidentiality to all the children.

THE SPECIALISED CLINICS

(*a*) *The Child Guidance Clinic* (conducted by Dr. B. J. Salisbury, MB., MRCPsych. DCH).

There were 424 consultations at this Clinic in 1978 (398 in 1977).

The work of the clinic has shown a gradual increase during the last year. A more permanent liaison has been made with the Children's Home at Greenfields and this has been visited weekly on a regular basis; the majority of these children have been the mutual concern of the Children Board and the Child Guidance Clinic. There have been several conferences when the appropriate heads of the child's school, social workers and the families have been invited to attend, where we have all tried to work out constructive long term plans—these conferences are especially useful to review secondary school children with multiple problems who need support and guidance at the end of their schooling and when they first start work.

There has been a moderate increase in the proportion of children referred to as "unmanageable at home" and seriously disturbed described as "noisy and disruptive in behaviour" at school, most of these being in the four to eight age groups, and reflecting an attitude of permissiveness often bordering on neglect on the part of the parents.

In addition there have been several older children referred with quite severe depressive illness or personality problems which have required more prolonged treatment, and are of concern in that psychiatric problems referred in adolescence require long term co-operation from the family, and help with adjustment in a work situation if they are to have good prognosis. Again I am grateful to Mrs. Jean Perfitt for her home visits which are an essential part of the clinic service, and the support that she has given to most of the families I have seen. Also to the staff at Greenfields and the Child Care Officers who have been responsible for working in very close co-operation and caring for the children and their families over long periods.

(*b*) *E.N.T. Clinics* (Mr. G. Midgley F.R.C.S.—Visiting Consultant)

Mr. Midgley visited the Island in February, June and November and saw a total of 71 pre and school aged children at Lukis House referred to him by the family doctors mainly as a result of the findings of the Audiology Clinics. He prescribed four hearing aids, arranged for two children to receive treatment at the Royal Hants Hospital, Winchester and three pre-school children to have special hearing tests in Southampton.

(*c*) *Audiometrician's Report* (Mrs. J. Goodwin, D.B.O.)

It is of paramount importance that defects of hearing be ascertained as early as possible and treatment sought if this is indicated. Even a trivial loss of hearing can be an educational handicap or a hindrance in the acquisition of clear speech. We have therefore arranged routinely audiometric testing for all children (whether pre school or school aged), with speech defects, and as part of the school medical examinations. Audiometry is also arranged at the request of family doctor, parent or teacher. Children are hearing tested at school on a pass/fail basis (screening) and the "failures" seen again at Lukis House (at an Audiology Clinic). At the latter Clinic, an appraisal of the E.N.T. condition is made, a comprehensive audio test is given and possibly a speech test of hearing also and the results sent to the family doctor with the request that he sees, advises or treats or maybe seeks the advice of Mr. Midgley. The number of audio-screenings performed in 1978 was 2438, the number of retests 380 and 53 audio tests were done at the request of the family doctors making a total of 2871 hearing tests performed. Of these, 156 (or 6.4%) were found to be monaural defects and 68 (or 2.8%) to be binaural, so that of the children tested 224 were found to have hearing defects.

(*d*) *Speech Therapy Clinic* (Miss J. M. Richmond, L.C.S.T.)

Speech Therapy continues as in the past few years with Mrs. M. Renier treating children at 6 schools, and Miss J. Richmond treating children at 11 schools and in the Clinic. The remaining schools are occasionally visited.

During the year, 121 new children were referred by the School Medical Officer. 108 children were admitted and added to the current number of 208. 21 children required minimal attention and the parents of 3 others did not wish for the children to be assessed. 93 children were subsequently discharged. There were 3,348 attendances.

St. Anne's School, Alderney was visited and the possibility of weekly treatment from a resident therapist was investigated.

(*e*) *Vision Testing* (Mrs. M. Edwards, D.B.O., and Mrs. Goodwin, D.B.O.)

Visual screening of pre school and school aged children is performed only by our two orthoptists—Mrs. Edwards and Mrs. Goodwin. Mrs. Edwards screens the pre school and the infant school children and conducts the Orthoptic clinic. The visual screening of the children in Junior and Secondary level schools is carried out by Mrs. Goodwin. Both orthoptists refer the " failures " to the eye specialist—Mr. Bonner Morgan for examination.

All school aged children are screened for visual defects as part of the routine school medical examinations and at the request of the family doctor, parent or teacher. All school children in the first year of Junior school and second year Secondary level are also routinely " screened ". Of these last 2 categories—268 failed the screening test in their schools and were retested at Lukis House. As a result, 91 were referred to Mr. Bonner Morgan.

(f) *Orthoptic Clinic* (Mrs. M. Edwards, D.B.O., Mrs. J. Robertson, D.B.O.)

This year two new schemes began in our clinic.

Once monthly now infants at risk from 6 months old to school age, referred by the School Medical Officer, are screened for the possible presence of squint.

28 youngsters were seen in 1978 and as a result 4 have visited the Eye Specialist for treatment.

Also during the year a small group of children with specific reading difficulties, selected by our School Psychologist, were assessed by the Ophthalmologist and the Orthoptist for associated focussing problems in order that they might take part in a pilot scheme whereby occlusion of the reference eye during reading sessions, and supportive Orthoptic exercises would be carried out.

This particular scheme pioneered by an Australian Ophthalmologist, Dr. Dunlop and his wife—an Orthoptist—is as yet only in its initial stage, the policy being a long term one. Several Orthoptic centres in England are also involved, and we hope that in selected cases it will prove helpful.

The statistical summary from the clinic is as follows:—

2,673 attendances were recorded. 110 new cases were referred by the Eye Specialists for investigation and treatment.

127 children were discharged—95 as cured with satisfactory binocular functions, and 35 as cosmetically satisfactory. During the three school terms, 1,466 children, mostly new entrants were screened in their schools for visual defects by Mrs. Edwards.

109 children were referred to the Eye Specialists as a result of these tests. Mr. Bonner-Morgan, F.R.C.S. performed 29 squint operations on school and pre school children during the year.

(g) *Free Advisory Physiotherapy* (Miss J. Ogier, M.C.S.P., S.R.P.)

Miss Ogier saw and advised 75 children with orthopaedic problems at clinics at Lukis House. She also paid domiciliary visits in order to instruct parents on play therapy and handling techniques. She has also entered schools so as to advise on any special arrangement for a handicapped pupil.

E. H. WITHERICK,
Deputy School Medical Officer.

REPORT ON SCHOOLS DENTAL SERVICE 1978

The Schools Dental Service is responsible for all pupils in States maintained schools, plus Special Place Holders at the colleges and grammar schools.

Staff

During the year we lost the services of Mr. R. Roe who returned to the mainland. In September Mr. M. Miller-Williams was appointed as third dental officer and took up his duties on 27th November. A second Recovery Room Attendant was appointed in December to help with the ever-increasing intravenous anaesthetics administered at the Clinic.

Extension

The building of the new general anaesthetic surgery/recovery room commenced at the end of January. This caused considerable disruption of work as Nos. 1 and 2 surgeries were out of action for a considerable time, approximately ten weeks. During this period only No. 3 surgery was fully functional and two dental officers had to share what was the original recovery room. During this time emergency work and inspections were the only work possible in this temporary surgery.

The new anaesthetic surgery and recovery facilities are now fully functional and ensure a much safer and more efficient service.

Inspections

The vast majority of the dental inspections were carried out at the Clinic under ideal conditions. Many of these were six monthly at the request of the parents and no-one who requested an inspection appointment and whose child was eligible to attend the Dental Clinic was refused. Six monthly orthodontic control inspections, i.e. how teeth were erupting into spaces provided by extractions, were also carried out. Patients attending for emergency treatment were also inspected and appointments given, if required, for follow-up conservation treatment. I must point out again the importance of the parent being present at the initial inspection in order that each case may be discussed individually and a treatment plan outlined. This makes the parent and child more dentally conscious and improves the chances of ultimate success in treatment. With our present staff of three dental officers we are unable to visit the schools as this would increase our workload beyond our capacity.

Extractions

The extraction of teeth, about twice as many deciduous as permanent due to pain or swelling, forms a large proportion of our work. The number of permanent teeth extracted was 1284 and of deciduous 2322. We try to encourage those presenting with toothache to improve their oral hygiene and to have any treatment necessary to make them dentally fit. Toothaches or other emergencies are seen the same day and this compares favourably with any emergency service elsewhere.

Conservation

The filling and crowning of permanent teeth has been our main priority although deciduous teeth were filled in the very young where loss of space due to early extraction might have led to eruptive problems later on.

Orthodontics

The demand for orthodontic treatment increases year by year and also the complexity of the cases. For the past year we have had to refer a number of cases to the mainland for a consultant's opinion. This system whilst being helpful is still very unsatisfactory and for some time I have felt that a consultant orthodontist should visit us approximately four times per year and spend a couple of days with us to advise on the more complex cases. The principal dental officer in Jersey is trying to arrange for a consultant to visit him and his colleagues, and has suggested that perhaps we could have him visit Guernsey as a joint effort. He could spend a session with each dental officer depending on the number of cases to be examined, and expenses could be shared with Jersey.

Maintenance

Arrangements have been made for the exterior of the Dental Clinic to be painted in 1979. Some of the interior, including one surgery, corridors and office are also to be repainted.

Figures for the year are appended with this report.

D. J. HEARNE,
Principal Dental Officer.

Dental inspection and treatment carried out by the Authority during the year 1978.

No. of Pupils on the Registers of Maintained Primary and Secondary Schools: 8,300 approx.

(1) Number of pupils inspected by the Authority's Dental Officers—		
(a) at school inspections	—	
(b) at clinic	5123	Total 5123
(2) Number found to require treatment		3618
(3) Number actually treated		3476
(4) Number of attendances made by pupils for treatment		11,189
(5) Number of patients made dentally fit		2593
(6) Sessions devoted to		
(a) school inspections	Nil	
(b) treatment	1168	Total 1168
(7) Fillings		
(a) permanent teeth	3754	
(b) temporary teeth	930	Total 4684
(8) Extractions		
(a) permanent teeth	1284	
(b) temporary teeth	2322	Total 3606
(9) Number of general anaesthetics given for extractions		1388
(10) Number of dentures provided		53
(11) Number of crowns fitted		89
(12) Number of root canal treatments		539
(13) Other operations		
(a) permanent teeth	667	
(b) temporary teeth	42	Total 709
(14) ORTHODONTICS		
(a) cases commenced during the year		131
(b) cases completed during the year		56
(c) cases discontinued during the year		8
(d) number of appliances fitted		169

Annual Report of the School Dental Officer in Alderney, 1978.

During 1978 all pupils at St. Anne's School were examined on three occasions and an average of 65% were found to require treatment each time. At least half of these pupils required only routine Preventive Dentistry in the form of topical fluoride treatments and fissure sealing. Associated with this I am now very pleased to report that there is already a substantial reduction in the number of fillings necessary. Comparing the last two years:

	1977	1978
Permanent teeth	405	249
Deciduous teeth	346	292

Some permanent teeth had to be extracted during the year but almost all of these were for orthodontic reasons. However, large numbers of deciduous teeth have been filled or extracted and these figures are high because a large proportion of five-year-old children starting school require extensive dentistry. These new pupils are considered a priority each year and they are made dentally fit as rapidly as possible.

This has been the first year with no backlog of work to deal with and it is therefore likely that similar amounts of dental work will be necessary in future years. These figures should therefore prove to be a useful basis for planning in the future.

I am grateful to the Headmaster and staff at St. Anne's School and to the staff at the Education Department in Guernsey for their continuing help and encouragement.

J. L. CURTIS, B.D.S.

Inspection and Treatment carried out by the Alderney School Dental Officer during the year 1978

Number of pupils on the Registers of St. Anne's School or who are special place holders at schools in Guernsey.	Approx. 260

Inspection

Number of sessions devoted to inspection of pupils at St. Anne's School: i.e. inspection of each pupil on three occasions	9
Proportion of pupils found to require treatment:	
first inspection:	65%
second inspection:	66%
third inspection:	64%

Treatment

Number of attendances made by pupils for treatment	1,081
Number of pupils made dentally fit (three inspections)	499
Fillings: (*a*) permanent teeth	249
(*b*) deciduous teeth	292
Extractions: (*a*) permanent teeth	28
(*b*) deciduous teeth	75
Number of general anaesthetics given	1
Number of intra-venous sedatives given	0
Number of local anaesthetics given	645
Number of dentures provided	1
Number of crowns fitted	0
Number of root canal fillings	1
Scaling and Polishing	86
Topical Fluoride Treatments	208
Number of teeth Fissure Sealed	448
Orthodontics: (*a*) cases commenced during the year	9
(*b*) cases completed during the year	13
(*c*) number of appliances fitted	14

J. L. CURTIS, B.D.S.